| Fill in this information to identify your case: | | |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| WESTERN DISTRICT OF WASHINGTON | _ | |
| Case number (if known) | _ Chapter you are filing under: | |
| | ☐ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

page 1

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | rt 1: | Identify Yourself | | |
|-----|--|--|--|---|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | You | r full name | | |
| | your pictu exam licen Bring ident | e the name that is on government-issued ire identification (for nple, your driver's se or passport). g your picture tification to your ting with the trustee. | Olivier First name C Middle name Zara Last name and Suffix (Sr., Jr., II, III) | Kristine First name Mabuti Middle name Ogoy Last name and Suffix (Sr., Jr., II, III) |
| 2. | usec Inclu | other names you have d in the last 8 years ade your married or den names. | | |
| 3. | your num Indiv | the last 4 digits of Social Security ber or federal vidual Taxpayer tification number | xxx-xx-2365 | xxx-xx-3223 |

Official Form 101

| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|--|---|---|
| Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | I have not used any business name or EINs. Business name(s) EINs | ■ I have not used any business name or EINs. Business name(s) EINs |
| Where you live | 300 Vuemont Pl. SE. #U105 | If Debtor 2 lives at a different address: |
| | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | King County | County |
| | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Where you live Why you are choosing this district to file for | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Business name(s) Business name(s) Business name(s) EINs Where you live 300 Vuemont PI. SE. #U105 Renton, WA 98056 Number, Street, City, State & ZIP Code King County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing this district to file for bankruptcy Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. |

| | otor 1 Olivier C Zara otor 2 Kristine Mabuti C | goy | | | | Case number (if known) | |
|-----|---|-----------------------|---------------------------------------|---|---|--|----|
| Par | t 2: Tell the Court About | Your Bank | ruptcy Case | e | | | |
| 7. | The chapter of the Bankruptcy Code you are | | | ief description of each, to to the top of page 1 a | | by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy | |
| | choosing to file under | ☐ Chapt | | o to the top of page 1 to | and encon the approp | mate post. | |
| | | ☐ Chapt | | | | | |
| | | ☐ Chapt | | | | | |
| | | | | | | | |
| | | ■ Chapt | er 13 | | | | |
| 8. | How you will pay the fee | abo ord | ut how you | may pay. Typically, if y ttorney is submitting yo | you are paying the fee | heck with the clerk's office in your local court for more detail e yourself, you may pay with cash, cashier's check, or mone pehalf, your attorney may pay with a credit card or check with | еу |
| | | ☐ I ne | ed to pay to Filing Fee | the fee in installments in Installments (Official | s. If you choose this o I Form 103A). | option, sign and attach the Application for Individuals to Pay | ′ |
| | | ☐ I re but that | quest that is not requited applies to | my fee be waived (Yo ired to, waive your fee, your family size and yo | u may request this op and may do so only it ou are unable to pay th | otion only if you are filing for Chapter 7. By law, a judge may f your income is less than 150% of the official poverty line the fee in installments). If you choose this option, you must be d (Official Form 103B) and file it with your petition. | |
| 9. | Have you filed for | ■ No. | | | | | |
| | bankruptcy within the last 8 years? | ☐ Yes. | | | | | |
| | | _ | District | | When | Case number | |
| | | | District | | When | Case number | |
| | | | District | | When | Case number | _ |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ■ No □ Yes. | | | | | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| | | | Debtor | | | Relationship to you | |
| | | | District _ | | When | Case number, if known | |
| 11. | Do you rent your | ■ No. | Go to line | e 12. | | | |
| | residence? | ☐ Yes. | Has you | r landlord obtained an e | eviction judgment aga | ainst you and do you want to stay in your residence? | |
| | | | | No. Go to line 12. | | | |
| | | | | Yes. Fill out <i>Initial State</i> pankruptcy petition. | ement About an Evicti | ion Judgment Against You (Form 101A) and file it with this | |

| | otor 1 Olivier C Zara Otor 2 Kristine Mabuti O | goy | | Case number (if known) |
|-----|---|--------------------|---|--|
| Par | t 3: Report About Any Bu | sinesses | You Own as a Sole Pro | prietor |
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to Part 4. | |
| | | ☐ Yes. | Name and location of | f business |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name of business, it | any |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Number, Street, City | |
| | it to this petition. | | | te box to describe your business: |
| | | | ☐ Health Care | Business (as defined in 11 U.S.C. § 101(27A)) |
| | | | | Real Estate (as defined in 11 U.S.C. § 101(51B)) |
| | | | Stockbroker | (as defined in 11 U.S.C. § 101(53A)) |
| | | | ☐ Commodity B | Broker (as defined in 11 U.S.C. § 101(6)) |
| | | | ☐ None of the | above |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadline operation | s. If you indicate that you | the court must know whether you are a small business debtor so that it can set appropriate are a small business debtor, you must attach your most recent balance sheet, statement of and federal income tax return or if any of these documents do not exist, follow the procedure |
| | For a definition of small | ■ No. | I am not filing under | Chapter 11. |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am filing under Cha Code. | pter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy |
| | | ☐ Yes. | I am filing under Cha | pter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. |
| Par | t 4: Report if You Own or | Have Any | / Hazardous Property o | r Any Property That Needs Immediate Attention |
| 14. | Do you own or have any property that poses or is alleged to pose a threat of imminent and | ■ No. | What is the hazard? | |
| | identifiable hazard to public health or safety? Or do you own any property that needs | | If immediate attention in needed, why is it needed. | |
| | immediate attention? | | nceded, why is it needs | м: |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is the property? | |
| | On 10 specific | | | Number, Street, City, State & Zip Code |
| | | | | |

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filled for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions

about finances.

☐ **Disability.** My physical disability causes

me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military

military duty in a milita combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

■ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to

be unable to participate in a briefing.

be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty

in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy
Case 16-11045-CMA Doc 1 Filed 02/29/16 Ent. 02/29/16 15:09:28 Pg. 5 of 49

| | otor 2 Kristine Mabuti O | goy | | | Case nu | ımber (if known) | |
|-----|--|----------------------------|---|----------------------------------|---|--|---------|
| Par | t 6: Answer These Questi | ons for Rep | orting Purposes | | | | |
| 16. | What kind of debts do you have? | | re your debts primarily consundividual primarily for a personal, | | | defined in 11 U.S.C. § 101(8) as "incurre | d by an |
| | | | No. Go to line 16b. | | | | |
| | | | Yes. Go to line 17. | | | | |
| | | | re your debts primarily busines noney for a business or investment | | | | |
| | | | No. Go to line 16c. | | | | |
| | | | Yes. Go to line 17. | | | | |
| | | 16c. S | tate the type of debts you owe th | at are not consu | mer debts or bu | siness debts | |
| 17. | Are you filing under Chapter 7? | ■ No. | am not filing under Chapter 7. Go | o to line 18. | | | |
| | Do you estimate that after any exempt property is excluded and | | am filing under Chapter 7. Do you xpenses are paid that funds will b | | | property is excluded and administrative cured creditors? | |
| | administrative expenses are paid that funds will | |] No | | | | |
| | be available for distribution to unsecured creditors? | С |] Yes | | | | |
| 18. | How many Creditors do | 1 -49 | | 1 ,000-5,000 | | ☐ 25,001-50,000 | |
| | you estimate that you owe? | ☐ 50-99 | | 5001-10,000 |) | 5 0,001-100,000 | |
| | | □ 100-199 □ 200-999 | | 10,001-25,0 | 00 | ☐ More than100,000 | |
| 19. | How much do you | □ \$0 - \$50 | ,000 | □ \$1,000,001 | - \$10 million | □ \$500,000,001 - \$1 billion | |
| | estimate your assets to be worth? | \$50,001 | | \$10,000,001 | | □ \$1,000,000,001 - \$10 billion | |
| | | | 1 - \$500,000 1 - \$1 million | □ \$50,000,001 □ \$100,000,00 | - \$100 million 01 - \$500 million | ☐ \$10,000,000,001 - \$50 billio ☐ More than \$50 billion | n |
| 20. | How much do you | \$ 0 - \$50 | ,000 | □ \$1,000,001 | - \$10 million | □ \$500,000,001 - \$1 billion | |
| | estimate your liabilities to be? | | - \$100,000 | □ \$10,000,001 □ \$50,000,001 | | □ \$1,000,000,001 - \$10 billior □ \$10,000,000,001 - \$50 billio | |
| | | | 1 - \$500,000 1 - \$1 million | | 1 - \$100 million 11 - \$500 million | | וונ |
| Par | t7: Sign Below | | | | | | |
| For | you | I have exan | nined this petition, and I declare u | under penalty of p | perjury that the i | information provided is true and correct. | |
| | | | | | | gible, under Chapter 7, 11,12, or 13 of title d I choose to proceed under Chapter 7. | e 11, |
| | | | ey represents me and I did not pa I have obtained and read the noti | | | is not an attorney to help me fill out this b). | |
| | | I request re | lief in accordance with the chapte | er of title 11, Unit | ed States Code | , specified in this petition. | |
| | | | case can result in fines up to \$25 | | | ney or property by fraud in connection wit o 20 years, or both. 18 U.S.C. §§ 152, 134 | |
| | | /s/ Olivier | C Zara | | /s/ Kristine I | | |
| | | Olivier C : Signature o | | | Kristine Mak Signature of D | | |
| | | Executed o | February 26, 2016 MM / DD / YYYY | | Executed on | February 26, 2016 MM / DD / YYYY | |

| Debtor 1 Olivier C Zara Debtor 2 Kristine Mabuti O | goy | Cas | se number (if known) |
|---|--|--|---|
| For your attorney, if you are epresented by one f you are not represented by an attorney, you do not need | I, the attorney for the debtor(s) named in this petition under Chapter 7, 11, 12, or 13 of title 11, United Stafor which the person is eligible. I also certify that I is 342(b) and, in a case in which § 707(b)(4)(D) applied in the schedules filed with the petition is incorrect. | ites Code, and have have delivered to the | explained the relief available under each chapter edebtor(s) the notice required by 11 U.S.C. § |
| o file this page. | /s/ Christopher A. Benson Signature of Attorney for Debtor | Date | February 26, 2016 MM / DD / YYYY |
| | Christopher A. Benson Printed name Law Office of Christopher A. Benson, PLLO Firm name 1814 S. 324th Pl. Ste. B Federal Way, WA 98003 Number, Street, City, State & ZIP Code | | |

Email address

Contact phone (253) 815-6940

21296 Bar number & State cbenson@cbenson.com

Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy Case 16-11045-CMA Doc 1 Filed 02/29/16 Ent. 02/29/16 15:09:28 Pg. 7 of 49

| Fill | in this information to identify your case: | | |
|-----------|--|-----------|-----------------------------|
| | tor 1 Olivier C Zara | | |
| Der | First Name Middle Name Last Name | | |
| | tor 2 Kristine Mabuti Ogoy | | |
| | use if, filing) First Name Middle Name Last Name | | |
| Uni | ed States Bankruptcy Court for the: WESTERN DISTRICT OF WASHINGTON | | |
| 1 | e number | | |
| (if kn | | _ | eck if this is an |
| | | ame | ended filing |
| | | | |
| <u>Of</u> | icial Form 106Sum | | |
| Su | mmary of Your Assets and Liabilities and Certain Statistical Information | | 12/15 |
| info | s complete and accurate as possible. If two married people are filing together, both are equally responsible f mation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page. 1: Summarize Your Assets | ded sche | edules after you file |
| | | | assets e of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) | ¢ | 0.00 |
| | 1a. Copy line 55, Total real estate, from Schedule A/B | | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$_ | 169,991.37 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$_ | 169,991.37 |
| Par | 2: Summarize Your Liabilities | | |
| | | | liabilities unt you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | \$ | 0.00 |
| | 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | Ψ_ | |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 25,701.41 |
| | | | |
| | Your total liabilities | \$ | 25,701.41 |
| Do | Output State Value In a second State Control | | |
| Par | 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$_ | 2,612.30 |
| 5. | Schedule J: Your Expenses (Official Form 106J) | ¢ | 2,487.30 |
| | Copy your monthly expenses from line 22c of Schedule J | \$_ | 2,407.30 |
| Par | 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | our other | schedules. |
| | . Voc | | |
| 7. | Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | a persor | nal, family, or |

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Summary of Your Assets and Liabilities and Certain Statistical Information Official Form 106Sum

page 1 of 2

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Best Case Bankruptcy

| Debtor 1 | Olivier C Zara |
|----------|----------------|
| Dobtor 2 | 17 1 41 1 1 4 |

Debtor 2 Kristine Mabuti Ogoy

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,782.24

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total c | laim |
|--|---------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| Check if this is a amended filling Check if this is a amended filling | | or 1 | Olivier C Zara | | | | | |
|--|-----------------------------|--|---|--|--|-----------------------------------|---|--|
| Check if this is a same number WESTERN DISTRICT OF WASHINGTON | | • | First Name | Middle Name | Last Name | | | |
| Check if this is a amended filing am | | | | | Last Name | | | |
| Check if this is a amended filing | | | and muntary Court for the | | DICT OF WASHINGTON | | | |
| Difficial Form 106A/B Schedule A/B: Property asch category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you this best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If ore space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question are specially one pages are specially asset in the category where you this fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If ore special pages, with your name and case number (if known). Answer every question are specially asset in the category where you think the category where you think the category where you the supplying correct information. If you are added to the category where you then an animal pages, with your name and case number (if known). Answer every question. If you are added to any page and the page and the category where every question. If you only any page and the property? No. Go to Part 2. Yes. Where is the property? No. Go to Part 2. Yes. Where is the property? No. Subaru Model: Impreza Debtor 1 only | Jnited | d States B | ankruptcy Court for the: | WESTERN DISTI | RICT OF WASHINGTON | | | |
| Schedule A/B: Property 12/15 | Case | number | | | | | | |
| Schedule A/B: Property 12/15 | Offic | cial Fo | orm 106A/B | | | | | |
| The cach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you this fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If the category where you then the category where you have a complete and accomplete and category where you then the property? Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in Do you own read and case number (if known). Answer every questions and case number of not? Include and vehicles you on the case or e | | | | ertv | | | | 12/15 |
| if its best. Be as complete and accurate as possible. If two married people are filing together, both are equal responsible for supplying correct information. To or space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every quest or open and case number (if known). Answer every quest of the control of the property? Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in Do you own or have any legal or equitable interest in any residence, building, land, or similar property? | | | - | | anly ana. If an accet fits in m | ro than one o | natagory list the asset in th | |
| Do you own or have any legal or equitable interest in any residence, building, land, or similar property? ■ No. Go to Part 2. □ Yes. Where is the property? ■ The substitution of the property? ■ No. Go to Part 2. □ Yes. Where is the property? ■ Describe Your Vehicles ■ Oyou own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that one one else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. ■ Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ■ No. ■ Yes 3.1 Make: Subaru | fits b | est. Be as pace is nee | complete and accurate as peded, attach a separate she | possible. If two marri et to this form. On th | ied people are filing together, bo le top of any additional pages, w | oth are equally rite your name | responsible for supplying | correct information. If |
| No. Go to Part 2. Ves. Where is the property? Part 2: Describe Your Vehicles o you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that omeone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No Yes Yes 3.1 Make: Subaru | Part 1: | Describe | e Each Residence, Building | , Land, or Other Rea | I Estate You Own or Have an Int | erest In | | |
| Describe Your Vehicles O you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that omeone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No | Doy | you own or | have any legal or equitable | interest in any resid | lence, building, land, or similar | property? | | |
| Yes. Where is the property? | | No Go to Pa | art 2 | | | | | |
| Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that omeone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No Yes 3.1 Make: Subaru Model: Impreza Year: 2002 Approximate mileage: 136000 Other information: Check if this is community property (see instructions) Who has an interest in the property? Check one the amount of any secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$3,500.00 \$3,500.00 \$3,500.00 Creditors Who Have Claims Secured by Property. Who has an interest in the property? Check one the entire property? Who has an interest in the property? Check one the entire property? Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. At least one of the debtors and another Who has an interest in the property? Check one the property of the entire property and any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or Schedule D: Creditors Who Have Claims Secured by Property. At least one of the debtors and another Current value of the current value of the entire property? At least one of the debtors and another Current value of the current value of the entire property. | _ | | | | | | | |
| Do not deduct secured claims or exemptions. Put the amount of any secured value of the entire property? No | | | is the property. | | | | | |
| omeone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No | | | | | | | | |
| Make: Substitutions Who has an interest in the property? Check one The amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Poebtor 1 only Debtor 2 only Current value of the entire property? Sa,500.00 | o you omed . Car | u own, lea one else dr rs, vans, t | ase, or have legal or eqrives. If you lease a vehic | ele, also report it on | Schedule G: Executory Cont | | | vehicles you own that |
| Model: Impreza Year: 2002 Approximate mileage: 136000 Other information: Debtor 1 only Current value of the entire property? | omeo | u own, lea one else dr rs, vans, t | ase, or have legal or eqrives. If you lease a vehic | ele, also report it on | Schedule G: Executory Cont | | | vehicles you own that |
| Approximate mileage: 136000 Other information: Debtor 1 and Debtor 2 only entire property? portion you own? | Oo you omed . Car | u own, lea one else dr rs, vans, t No Yes | ase, or have legal or eq rives. If you lease a vehic rucks, tractors, sport u | ele, also report it on | Schedule G: Executory Cont | racts and Un | nexpired Leases. Do not deduct secured cla | aims or exemptions. Put |
| Other information: At least one of the debtors and another Check if this is community property (see instructions) 3.2 Make: Kawasaki Model: Vulcan Year: 2002 Approximate mileage: 25000.00 Other information: Check if this is community property Who has an interest in the property? Check one Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the entire property? Current value of the entire property? Check if this is community property \$1,000.00 \$1,000.00 | Oo you omed . Car | u own, lea one else dr rs, vans, t No Yes | ase, or have legal or eq rives. If you lease a vehic rrucks, tractors, sport u | ele, also report it on tility vehicles, mot | Schedule G: Executory Cont torcycles an interest in the property? Cher | racts and Un | Do not deduct secured club the amount of any secure | aims or exemptions. Put |
| Check if this is community property (see instructions) \$3,500.00 \$3,500.00 | o you omed . Car | u own, lead one else dr rs, vans, t No Yes Make: Model: Year: | Subaru Impreza | tility vehicles, mot Who has Debtor | Schedule G: Executory Constorcycles an interest in the property? Cherr 1 only | racts and Un | Do not deduct secured class the amount of any secure Creditors Who Have Claim Current value of the | aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the |
| Model: Vulcan Year: 2002 Approximate mileage: Other information: Debtor 1 and Debtor 2 only Other information: Check if this is community property Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Check one the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the entire property? S1,000.00 \$1,000.00 | Oo you omed . Car | u own, lead one else drone else drone, vans, to ves Make: Model: Year: Approximation | Subaru Impreza 2002 ase, or have legal or equives. If you lease a vehicle rucks, tractors, sport use a subaru Impreza 2002 | Who has Debtor | schedule G: Executory Conditorcycles an interest in the property? Chemical Configuration of the property of t | racts and Un | Do not deduct secured class the amount of any secure Creditors Who Have Claim Current value of the | aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the |
| Model: Vulcan Year: 2002 Approximate mileage: 25000.00 Other information: Check if this is community property The amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own? Current value of the entire property? \$1,000.00 | Oo you omed . Car | u own, lead one else drone else drone, vans, to ves Make: Model: Year: Approximation | Subaru Impreza 2002 ase, or have legal or equives. If you lease a vehicle rucks, tractors, sport use a subaru Impreza 2002 | Who has Debtor Debtor At leas | schedule G: Executory Constorcycles an interest in the property? Cherr 1 only 12 only 13 and Debtor 2 only 15 one of the debtors and another 15 if this is community property | racts and Un | Do not deduct secured cluber the amount of any secure Creditors Who Have Clair Current value of the entire property? | aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the |
| Year: 2002 Approximate mileage: 25000.00 Other information: □ Debtor 2 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property □ St. (2002) Current value of the entire property? portion you own? □ St. (2002) | Oo you omed | u own, lead one else drives, vans, to Yes Make: Model: Year: Approxima Other infor | Subaru Impreza 2002 ate mileage: 136 | Who has Debtor Debtor At leas Check (see in: | schedule G: Executory Constorcycles an interest in the property? Chert 1 only 12 only 13 and Debtor 2 only 15 one of the debtors and another 15 if this is community property 15 structions) | racts and Un | Do not deduct secured class the amount of any secure Creditors Who Have Clais Current value of the entire property? \$3,500.00 | aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$3,500.00 |
| Approximate mileage: 25000.00 Other information: Debtor 1 and Debtor 2 only entire property? portion you own? At least one of the debtors and another Check if this is community property \$1,000.00 \$1,000.00 | Car | u own, lead one else drome else drome, vans, to ves Make: Model: Year: Approxima Other infort Make: | Subaru Impreza 2002 ate mileage: 136 | Who has Debtor Debtor At leas Check (see in: | schedule G: Executory Constorcycles an interest in the property? Cheman interest in the property? Cheman interest in the property and another at if this is community property structions) an interest in the property? Cheman interest in the property? | racts and Un | Do not deduct secured class the amount of any secure Creditors Who Have Clais Current value of the entire property? \$3,500.00 Do not deduct secured class the amount of any secure | aims or exemptions. Put id claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$3,500.00 |
| ■ Check if this is community property \$1,000.00 \$1,000.00 | Oo you omed | u own, lead one else drome else drome else dromes, vans, to the second of the second o | Subaru Impreza 2002 ate mileage: 136 rmation: Kawasaki Vulcan | Who has Debtor Debtor Check (see in: | an interest in the property? Cher 1 only 1 and Debtor 2 only 1 and Debtor 2 only 1 st one of the debtors and another 1 structions) an interest in the property? Cher 1 only | racts and Un | Do not deduct secured class the amount of any secure Creditors Who Have Claim Current value of the entire property? \$3,500.00 Do not deduct secured class amount of any secure Creditors Who Have Claim Creditors Who Have Claim Creditors Who Have Claim Creditors Who Have Claim Control C | aims or exemptions. Put declaims on Schedule D: ms Secured by Property. Current value of the portion you own? \$3,500.00 aims or exemptions. Put declaims on Schedule D: ms Secured by Property. |
| | Car | u own, lead one else drome else drome else dromes, vans, to the second of the second o | Subaru Impreza 2002 ate mileage: 136 rmation: Kawasaki Vulcan 2002 | Who has Debtor Check (see in: | an interest in the property? Cherr 1 only 1 and Debtor 2 only 1 and Debtor 2 only 1 st one of the debtors and another 1 (if this is community property structions) an interest in the property? Cherr 1 only 1 2 | racts and Un | Do not deduct secured class the amount of any secure Creditors Who Have Claim Current value of the entire property? \$3,500.00 Do not deduct secured class amount of any secure Creditors Who Have Claim Current value of the | aims or exemptions. Put de claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$3,500.00 aims or exemptions. Put de claims on Schedule D: ms Secured by Property. Current value of the |
| | Oo you omed | u own, lead one else drome else drome else dromes, vans, to the second of the second o | Subaru Impreza 2002 ate mileage: 2500 ase, or have legal or equives. If you lease a vehice and a vehice arucks, tractors, sport userucks, sport | Who has Debtor At leas Who has Check (see in: Debtor Debtor Debtor Debtor Debtor | an interest in the property? Cherr 1 only 1 and Debtor 2 only 1 structions) an interest in the property? Cherr 1 only 1 and Debtor 2 only 1 and Debtor 2 only 1 and another 1 are community property 1 and interest in the property? Cherr 1 only 1 and Debtor 2 only | racts and Un | Do not deduct secured class the amount of any secure Creditors Who Have Claim Current value of the entire property? \$3,500.00 Do not deduct secured class amount of any secure Creditors Who Have Claim Current value of the | aims or exemptions. Put de claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$3,500.00 aims or exemptions. Put de claims on Schedule D: ms Secured by Property. Current value of the |
| | Oo you omed | u own, lead one else drome else drome else dromes, vans, to the second of the second o | Subaru Impreza 2002 ate mileage: 2500 ase, or have legal or equives. If you lease a vehice and a vehice arucks, tractors, sport userucks, sport | Who has Debtor At leas Who has Check (see in: Debtor Debtor At leas Check (see in: Check | schedule G: Executory Content torcycles an interest in the property? Chert 1 only 1 and Debtor 2 only 1 and Debtor 3 and another 1 to the debtors and another 1 to the debtors and another 1 to the debtors and another 2 to the debtors and another 3 if this is community property 4 and Debtor 2 only 5 to one of the debtors and another 6 if this is community property | racts and Un | Do not deduct secured class the amount of any secure Creditors Who Have Claim Current value of the entire property? \$3,500.00 Do not deduct secured class amount of any secure Creditors Who Have Claim Current value of the entire property? | aims or exemptions. Put de claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$3,500.00 aims or exemptions. Put de claims on Schedule D: ms Secured by Property. Current value of the portion you own? |

☐ Yes

Official Form 106A/B Schedule A/B: Property page 1

| Debtor 2 | | | Case number (if known |) |
|------------------------|--|--|---|---|
| 5 Add .page | the dollar value of es you have attach | the portion you own for all of your entries fro ed for Part 2. Write that number here | m Part 2, including any entries for => | \$4,500.00 |
| Part 3: | Describe Your Perso | nal and Household Items | | |
| | | egal or equitable interest in any of the followi | ng items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| Exar □ No | 0 | furnishings nces, furniture, linens, china, kitchenware | | |
| ■ Ye | es. Describe | Bedroom Furnishings | | \$1,000.00 |
| | | Cookware And Tableware | | \$200.00 |
| | | Dining Room Furnishings | | \$200.00 |
| | | Living Room Furnishings | | \$400.00 |
| □ No ■ Ye | | phones, cameras, media players, games Computer Equipment | | \$3,000.00 |
| | | TV | | \$400.00 |
| Exam No Ye 9. Equip | other collect other. ot | ographic, exercise, and other hobby equipment; b | | |
| ■ Ye | es. Describe | Sports Equipment | | \$200.00 |
| | amples: Pistols, rifle | s, shotguns, ammunition, and related equipment | 7 | teno no |
| | | 1 pistol | | \$600.00 |
| | amples: Everyday c | othes, furs, leather coats, designer wear, shoes, | accessories | |
| | Dogotibe | Men's Clothing | | \$600.00 |
| | | Women's Clothing | | \$700.00 |

Official Form 106A/B Schedule A/B: Property page 2

| | ebtor 1 ebtor 2 | Olivier (Kristine | C Zara Mabuti Ogo | ру | Case number (if known) | |
|-----|---------------------------|-------------------------------|-------------------------------|-----------------------------------|---|---|
| 12. | Jewelry Examp □ No | | day jewelry, co | stume jewelry, en | ngagement rings, wedding rings, heirloom jewelry, watches, gems, | gold, silver |
| | ■ Yes. | Describe | | Jewelry | | \$1,000.00 |
| | | | Wome | en's Jewelry | | \$3,800.00 |
| | Examp ■ No □ Yes. | Describe | cats, birds, ho | | lid not already list, including any health aids you did not list | |
| | ■ No | | ific information | | | |
| 15 | | | | | n Part 3, including any entries for pages you have attached | \$12,100.00 |
| Pa | rt 4: Des | scribe Your | Financial Asset | S | | |
| Do | o you ow | n or have | any legal or e | quitable interest | t in any of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. | ■ No | - | | | r home, in a safe deposit box, and on hand when you file your peti | tion |
| 17. | | | ing, savings, o | | accounts; certificates of deposit; shares in credit unions, brokerage unts with the same institution, list each. | e houses, and other similar |
| | _ | | | | Institution name: | |
| | | | 17.1. | Checking | Bank Account -Checking at BECU | \$629.00 |
| | | | 17.2. | | Bank Account -Savings at BECU | \$13.00 |
| 18. | | | | | brokerage firms, money market accounts | |
| 10 | | ublicky trad | lad stock and | Institution or issu | | est in an LLC partnership |
| 19. | | int venture | | interests in inco | orporated and unincorporated businesses, including an intere | st in an LLC, partnership, |
| | ☐ Yes. | Give spec | | about them me of entity: | | |
| | Negotia Non-ne ■ No | iable instrui egotiable in | ments include pastruments are | personal checks, those you cannot | egotiable and non-negotiable instruments cashiers' checks, promissory notes, and money orders. transfer to someone by signing or delivering them. | |
| | ⊔ Yes. | ive specil | fic information Iss | about them uer name: | | |

Official Form 106A/B Schedule A/B: Property

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Best Case Bankruptcy

page 3

| | ebtor 1 ebtor 2 | Kristine Mabut | i Ogoy | Case number (if know | n) |
|-----|--------------------|--|---|--|--|
| 21. | | ment or pension acoles: Interests in IRA | | 403(b), thrift savings accounts, or other pension or profit-shari | ing plans |
| | | List each account s | eparately. Type of account: | Institution name: 401k T.Row Price Through Employer | \$149,179.38 |
| 22. | Your s | | deposits you have made s | so that you may continue service or use from a company t, public utilities (electric, gas, water), telecommunications com | panies, or others |
| | ☐ No | | | to a Maritan and a series of the Maria. | |
| | ■ Yes. | | | Institution name or individual: Landlord | \$1,100.00 |
| _ | | | | | |
| 23. | Annuiti | ies (A contract for a | a periodic payment of mo | ney to you, either for life or for a number of years) | |
| | Yes | lssue | er name and description. | | |
| 24. | 26 U.S.0 | | IRA, in an account in a 9A(b), and 529(b)(1). | qualified ABLE program, or under a qualified state tuition | program. |
| | ■ No □ Yes | Instit | ution name and descripti | on. Separately file the records of any interests.11 U.S.C. § 521 | (c): |
| | ■ No | | re interests in property (| other than anything listed in line 1), and rights or powers | exercisable for your benefit |
| | Examp ■ No | oles: Internet domai | n names, websites, proce | and other intellectual property eeds from royalties and licensing agreements | |
| | ☐ Yes. | Give specific inforr | nation about them | | |
| 27. | | | d other general intangib is, exclusive licenses, coo | oles operative association holdings, liquor licenses, professional lice | enses |
| | | Give specific inform | mation about them | | |
| M | oney or | property owed to y | /ou? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | Tax ref | unds owed to you | | | dame of exemptions. |
| | | Give specific inform | nation about them, includ | ing whether you already filed the returns and the tax years | |
| | | | Estimat | ed 2015 Tax Refund | \$1,500.00 |
| 29. | | support | | | |
| | Examp ■ No | oles: Past due or lur | np sum alimony, spousal | support, child support, maintenance, divorce settlement, prop | erty settlement |
| | | Give specific inform | nation | | |
| 30. | Examp | | | ments, disability benefits, sick pay, vacation pay, workers' comeone else | npensation, Social Security |
| | ■ No □ Yes. | Give specific inforr | mation | | |
| | | n 106A/B | | Schedule A/B: Property | page |

Case 16-11045-CMA Doc 1 Filed 02/29/16 Ent. 02/29/16 15:09:28 Pg. 13 of 49

Best Case Bankruptcy

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| Debtor 1 Debtor 2 | Olivier C Zara Kristine Mabuti Ogoy | | Case number (if known) | |
|----------------------|--|---|---|----------------------------|
| | sts in insurance policies uples: Health, disability, or life in | surance; health savings account | (HSA); credit, homeowner's, or renter's insura | ance |
| | Name the insurance company Compan | of each policy and list its value. y name: | Beneficiary: | Surrender or refund value: |
| If you some | | you from someone who has di ust, expect proceeds from a life i | ed nsurance policy, or are currently entitled to red | ceive property because |
| 33. Claim: Exam | s against third parties, wheth | er or not you have filed a lawsi sputes, insurance claims, or righ | uit or made a demand for payment ts to sue | |
| ■ No | contingent and unliquidated | claims of every nature, includi | ng counterclaims of the debtor and rights t | to set off claims |
| □ No | nancial assets you did not alm . Give specific information | Wages Garnished Within | 90 Days Of Case Filing 5: \$217.90; 12/24/15: \$390.25 | \$969.99 |
| | | | any entries for pages you have attached | \$153,391.37 |
| Part 5: De | escribe Any Business-Related Pro | perty You Own or Have an Interest I | n. List any real estate in Part 1. | |
| No. G | own or have any legal or equitable o to Part 6. Go to line 38. | interest in any business-related pr | operty? | |
| | escribe Any Farm- and Commercia you own or have an interest in farmla | I Fishing-Related Property You Own | n or Have an Interest In. | |
| ■ No | u own or have any legal or eq . Go to Part 7. s. Go to line 47. | uitable interest in any farm- or | commercial fishing-related property? | |
| Part 7: | Describe All Property You Own | or Have an Interest in That You Dic | Not List Above | |
| Exam | u have other property of any lapples: Season tickets, country clapples | | | |
| ■ No □ Yes. | . Give specific information | | | |
| 54. Add | the dollar value of all of your | entries from Part 7. Write that | number here | \$0.00 |

Official Form 106A/B Schedule A/B: Property page 5

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Olivier C Zara Debtor 1 Debtor 2 Kristine Mabuti Ogoy Case number (if known) List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$4,500.00 57. Part 3: Total personal and household items, line 15 \$12,100.00 58. Part 4: Total financial assets, line 36 \$153,391.37 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$169,991.37 Copy personal property total \$169,991.37

Total of all property on Schedule A/B. Add line 55 + line 62

Official Form 106A/B Schedule A/B: Property

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page 6

\$169,991.37

| Fill in this information to identify your case: | | | | | | |
|---|-------------------|--------------------|---------------|--|---------------------|--|
| Debtor 1 | Olivier C Zara | | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | Kristine Mabuti O | goy | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: | | WESTERN DISTRICT O | DF WASHINGTON | | | |
| Case number | | | | | | |
| (if known) | | | | | Check if this is an | |
| | | | | | amended filing | |
| (ii known) | | | | | _ | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) | | | | | | | | | |
|--|--|--|--|---|------------------------------------|--|--|--|--|
| | ■ You are claiming federal exemptions. 11 | U.S.C. § 522(b)(2) | | | | | | | |
| 2. | For any property you list on Schedule A/B | For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the Amount of the exemption you claim portion you own | | | Specific laws that allow exemption | | | | |
| | | Copy the value from Schedule A/B | Check only one box for each exemption. | | | | | | |
| | 2002 Subaru Impreza 136000 miles | \$3,500.00 | | \$3,500.00 | 11 U.S.C. § 522(d)(2) | | | | |
| | Line Holli Golleddie Arb. 3.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| | 2002 Kawasaki Vulcan 25000.00 miles | \$1,000.00 | | \$1,000.00 | 11 U.S.C. § 522(d)(2) | | | | |
| | Line from Schedule A/B: 3.2 | | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| | Bedroom Furnishings Line from Schedule A/B: 6.1 | \$1,000.00 | | \$1,000.00 | 11 U.S.C. § 522(d)(3) | | | | |
| | Line Holli Schedule Arb. 9.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| | Cookware And Tableware Line from Schedule A/B: 6.2 | \$200.00 | | \$200.00 | 11 U.S.C. § 522(d)(3) | | | | |
| | Line Hom Schedule A/B. 0.2 | | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| | Dining Room Furnishings | \$200.00 | | \$200.00 | 11 U.S.C. § 522(d)(3) | | | | |
| | LINE HOITI SCHEUUR AVD. U.S | | | 100% of fair market value, up to any applicable statutory limit | | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 3

Best Case Bankruptcy

Olivier C Zara Debtor 1 Debtor 2 Kristine Mabuti Ogoy Case number (if known)

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | he Amount of the exemption you claim | | Specific laws that allow exemption | |
|--|--------------------------------------|--------------------------------------|---|------------------------------------|--|
| | Copy the value from Schedule A/B | Chec | ck only one box for each exemption. | | |
| Living Room Furnishings Line from Schedule A/B: 6.4 | \$400.00 | | \$400.00 | 11 U.S.C. § 522(d)(3) | |
| Elle Holli Gelledale PAB. G.P | | | 100% of fair market value, up to any applicable statutory limit | | |
| Computer Equipment Line from Schedule A/B: 7.1 | \$3,000.00 | | \$3,000.00 | 11 U.S.C. § 522(d)(3) | |
| Elle Holli Golloddie 172. III | | | 100% of fair market value, up to any applicable statutory limit | | |
| TV Line from Schedule A/B: 7.2 | \$400.00 | | \$400.00 | 11 U.S.C. § 522(d)(3) | |
| | | | 100% of fair market value, up to any applicable statutory limit | | |
| Sports Equipment Line from Schedule A/B: 9.1 | \$200.00 | | \$200.00 | 11 U.S.C. § 522(d)(5) | |
| Zino nom osnosalo /v2. em | | | 100% of fair market value, up to any applicable statutory limit | | |
| 1 pistol Line from Schedule A/B: 10.1 | \$600.00 | | \$600.00 | 11 U.S.C. § 522(d)(5) | |
| Ellie Holli Gelledale PAB. 1011 | | | 100% of fair market value, up to any applicable statutory limit | | |
| Men's Clothing Line from Schedule A/B: 11.1 | \$600.00 | | \$600.00 | 11 U.S.C. § 522(d)(3) | |
| Ellic Holli Golloddio 172. TTT | | | 100% of fair market value, up to any applicable statutory limit | | |
| Women's Clothing Line from Schedule A/B: 11.2 | \$700.00 | | \$700.00 | 11 U.S.C. § 522(d)(3) | |
| Ellie IIIII Genedale 745. The | | | 100% of fair market value, up to any applicable statutory limit | | |
| Men's Jewelry Line from Schedule A/B: 12.1 | \$1,000.00 | | \$1,000.00 | 11 U.S.C. § 522(d)(4) | |
| Elle Holli Golloddio 772. Tal | | | 100% of fair market value, up to any applicable statutory limit | | |
| Women's Jewelry Line from Schedule A/B: 12.2 | \$3,800.00 | | \$2,100.00 | 11 U.S.C. § 522(d)(4) | |
| Line Holli Golladdic PAB. 12.2 | | | 100% of fair market value, up to any applicable statutory limit | | |
| Women's Jewelry Line from Schedule A/B: 12.2 | \$3,800.00 | | \$1,700.00 | 11 U.S.C. § 522(d)(5) | |
| LINE HOTH Scriedule A/B: 12.2 | | | 100% of fair market value, up to any applicable statutory limit | | |
| Checking: Bank Account -Checking at BECU | \$629.00 | | \$629.00 | 11 U.S.C. § 522(d)(5) | |
| Line from Schedule A/B: 17.1 | | | 100% of fair market value, up to any applicable statutory limit | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 2 of 3

| | ebtor 2 Olivier C Zara Kristine Mabuti Ogoy | | | Case number (if known) | | | |
|----|--|---|---------|---|------------------------------------|--|--|
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | | | Specific laws that allow exemption | | |
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | | | |
| | Bank Account -Savings at BECU Line from Schedule A/B: 17.2 | \$13.00 ■ | | \$13.00 | 11 U.S.C. § 522(d)(5) | | |
| | Enterior Contactato 702. | | | 100% of fair market value, up to any applicable statutory limit | | | |
| | 401k T.Row Price Through Employer Line from Schedule A/B: 21.1 | \$149,179.38 | | \$149,179.38 | 11 U.S.C. § 522(d)(10)(E) | | |
| | Line from Schedule AVD. 2111 | | | 100% of fair market value, up to any applicable statutory limit | | | |
| | Landlord Line from Schedule A/B: 22.1 | \$1,100.00 | | \$1,100.00 | 11 U.S.C. § 522(d)(5) | | |
| | Line from Schedule AVD. 22.1 | | | 100% of fair market value, up to any applicable statutory limit | | | |
| | Estimated 2015 Tax Refund Line from Schedule A/B: 28.1 | \$1,500.00 | | \$1,500.00 | 11 U.S.C. § 522(d)(5) | | |
| | Line from Schedule AVD. 20.1 | | | 100% of fair market value, up to any applicable statutory limit | | | |
| | Wages Garnished Within 90 Days Of Case Filing | \$969.99 | | \$969.99 | 11 U.S.C. § 522(d)(5) | | |
| | 11/27/15: \$361.57; 12/11/15: \$217.90; 12/24/15: \$390.25 Total \$969.99 Line from <i>Schedule A/B</i> : 35.1 | | | 100% of fair market value, up to any applicable statutory limit | | | |
| 3. | | Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) No | | | | | |
| | ☐ Yes. Did you acquire the property covere ☐ No | d by the exemption w | ithin 1 | ,215 days before you filed this case | ? | | |

Official Form 106C

☐ Yes

| Fill in this infor | mation to identify your | case: | | |
|------------------------|--------------------------|--------------------|---------------|--------------------------------------|
| Debtor 1 | Olivier C Zara | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Kristine Mabuti C | goy | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | WESTERN DISTRICT (| OF WASHINGTON | |
| Case number (if known) | | | | ☐ Check if this is an amended filing |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 1

| Fill in | | | | |
|--|---|--|--|--|
| | n this information to identify your case: | | | |
| Debto | or 1 Olivier C Zara | | | |
| 5 | First Name | Middle Name Last Name | | |
| (Spous | or 2 He if, filing) Kristine Mabuti Ogoy First Name | Middle Name Last Name | | |
| | | | | |
| Unite | d States Bankruptcy Court for the: WE | STERN DISTRICT OF WASHINGTON | | |
| Case | number | | | |
| (if know | vn) | | _ | f this is an |
| | | | amende | ed filing |
| Offic | cial Form 106E/F | | | |
| | edule E/F: Creditors Who | Have Unsecured Claims | | 12/15 |
| any exe Schedu D: Cred the Con numbe Part | ecutory contracts or unexpired leases that coule G: Executory Contracts and Unexpired Le ditors Who Have Claims Secured by Property ntinuation Page to this page. If you have no iter (if known). List All of Your PRIORITY Unsecu | | operty (Official Form 1 cured claims that are entries in the boxes o | 06A/B) and on listed in Schedule on the left. Attach |
| _ | o any creditors have priority unsecured claim | ns against you? | | |
| | No. Go to Part 2. | | | |
| | Yes. | and they have more than an a priority upon a set all the life the set all the | for each alsies Ts | sh alaim lists d |
| id po | entify what type of claim it is. If a claim has both | reditor has more than one priority unsecured claim, list the creditor separately priority and nonpriority amounts, list that claim here and show both priority an rding to the creditor's name. If you have more than two priority unsecured clai n, list the other creditors in Part 3. | d nonpriority amounts. | As much as |
| (F | For an explanation of each type of claim, see the | instructions for this form in the instruction booklet.) Total claim | Briarity | Nonnriority |
| | | Total Claim | Priority amount | Nonpriority amount |
| 2.1 | Department Of Treasury | Last 4 digits of account number 3223 \$0.00 | \$0.00 | \$0.00 |
| | Priority Creditor's Name Internal Revenue Services | When was the debt incurred? | | |
| | Fresno, CA 93888 | | _ | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | ☐ Debtor 1 only | | | |
| | _ | ☐ Unliquidated | | |
| | Debtor 2 only | ☐ Unliquidated ☐ Disputed | | |
| | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | | | |
| | _ | ☐ Disputed | | |
| 1 | ■ Debtor 1 and Debtor 2 only ■ At least one of the debtors and another | ☐ Disputed Type of PRIORITY unsecured claim: ☐ Domestic support obligations | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of PRIORITY unsecured claim: ☐ Domestic support obligations | | |
| | ■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another ■ Check if this claim is for a community del | □ Disputed Type of PRIORITY unsecured claim: □ Domestic support obligations □ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated | | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community delays the claim subject to offset? | ☐ Disputed Type of PRIORITY unsecured claim: ☐ Domestic support obligations ☐ Taxes and certain other debts you owe the government | | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community del s the claim subject to offset? No Yes Internal Revenue Service | □ Disputed Type of PRIORITY unsecured claim: □ Domestic support obligations □ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated | | \$0.00 |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community del Is the claim subject to offset? No Yes Internal Revenue Service Priority Creditor's Name 915 Second Ave SPF Office | □ Disputed Type of PRIORITY unsecured claim: □ Domestic support obligations ■ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify | | \$0.00 |
| | ■ Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community del is the claim subject to offset? No Yes Internal Revenue Service Priority Creditor's Name | □ Disputed Type of PRIORITY unsecured claim: □ Domestic support obligations ■ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify Last 4 digits of account number 3223 \$0.00 | | \$0.00 |
| 2.2 | ■ Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community del Is the claim subject to offset? No Yes Internal Revenue Service Priority Creditor's Name 915 Second Ave SPF Office Seattle WA 98174, Se | □ Disputed Type of PRIORITY unsecured claim: □ Domestic support obligations ■ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify Last 4 digits of account number 3223 \$0.00 When was the debt incurred? | | \$0.00 |
| 2.2 | ■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another ■ Check if this claim is for a community delease the claim subject to offset? ■ No □ Yes ■ Internal Revenue Service Priority Creditor's Name 915 Second Ave SPF Office Seattle WA 98174, Se Number Street City State Zlp Code | □ Disputed Type of PRIORITY unsecured claim: □ Domestic support obligations □ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify □ Last 4 digits of account number 3223 \$0.00 When was the debt incurred? □ As of the date you file, the claim is: Check all that apply □ Contingent | | \$0.00 |
| 2.2 | Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community del Is the claim subject to offset? No Yes Internal Revenue Service Priority Creditor's Name 915 Second Ave SPF Office Seattle WA 98174, Se Number Street City State Zlp Code Who incurred the debt? Check one. | □ Disputed Type of PRIORITY unsecured claim: □ Domestic support obligations ■ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify Last 4 digits of account number 3223 \$0.00 When was the debt incurred? As of the date you file, the claim is: Check all that apply □ Contingent □ Unliquidated | | \$0.00 |
| 2.2 | Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community del Is the claim subject to offset? No Yes Internal Revenue Service Priority Creditor's Name 915 Second Ave SPF Office Seattle WA 98174, Se Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only | □ Disputed Type of PRIORITY unsecured claim: □ Domestic support obligations □ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify □ Last 4 digits of account number 3223 \$0.00 When was the debt incurred? □ As of the date you file, the claim is: Check all that apply □ Contingent | | \$0.00 |
| 2.2 | Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community delest the claim subject to offset? No Yes Internal Revenue Service Priority Creditor's Name 915 Second Ave SPF Office Seattle WA 98174, Se Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | □ Disputed Type of PRIORITY unsecured claim: □ Domestic support obligations □ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify □ Last 4 digits of account number 3223 \$0.00 When was the debt incurred? □ As of the date you file, the claim is: Check all that apply □ Contingent □ Unliquidated □ Disputed Type of PRIORITY unsecured claim: | | \$0.00 |
| 2.2 | Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community del Is the claim subject to offset? No Yes Internal Revenue Service Priority Creditor's Name 915 Second Ave SPF Office Seattle WA 98174, Se Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another | □ Disputed Type of PRIORITY unsecured claim: □ Domestic support obligations □ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify □ Last 4 digits of account number 3223 \$0.00 When was the debt incurred? □ As of the date you file, the claim is: Check all that apply □ Contingent □ Unliquidated □ Disputed Type of PRIORITY unsecured claim: □ Domestic support obligations | | \$0.00 |
| 2.2 | Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community del Is the claim subject to offset? No Yes Internal Revenue Service Priority Creditor's Name 915 Second Ave SPF Office Seattle WA 98174, Se Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community del | □ Disputed Type of PRIORITY unsecured claim: □ Domestic support obligations □ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify □ Last 4 digits of account number 3223 \$0.00 When was the debt incurred? □ As of the date you file, the claim is: Check all that apply □ Contingent □ Unliquidated □ Disputed Type of PRIORITY unsecured claim: □ Domestic support obligations □ Taxes and certain other debts you owe the government | | \$0.00 |
| 2.2 | Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community del Is the claim subject to offset? No Yes Internal Revenue Service Priority Creditor's Name 915 Second Ave SPF Office Seattle WA 98174, Se Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another | □ Disputed Type of PRIORITY unsecured claim: □ Domestic support obligations □ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify □ Last 4 digits of account number 3223 \$0.00 When was the debt incurred? □ As of the date you file, the claim is: Check all that apply □ Contingent □ Unliquidated □ Disputed Type of PRIORITY unsecured claim: □ Domestic support obligations | \$0.00 | \$0.00 |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 8

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Best Case Bankruptcy

| | tor 1 Olivier C Zara tor 2 Kristine Mabuti Ogoy | | Case num | ber (if know) | | | | |
|------|---|--|--------------------|---------------------------|------------------------|--------------|--|--|
| 2.3 | Internal Revenue Service | Last 4 digits of account number | 3223 | \$0.00 | \$0.00 | \$0.00 | | |
| | Priority Creditor's Name PO Box 7346 Philadelphia, PA 19101-7346 | When was the debt incurred? | | | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that | apply | | | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | | | | |
| | ☐ Debtor 1 only | ☐ Unliquidated | | | | | | |
| | ☐ Debtor 2 only | ☐ Disputed | | | | | | |
| | ■ Debtor 1 and Debtor 2 only | Type of PRIORITY unsecured cla | im: | | | | | |
| | ☐ At least one of the debtors and another | ☐ Domestic support obligations | | | | | | |
| | ■ Check if this claim is for a community debt Is the claim subject to offset? | ■ Taxes and certain other debts y □ Claims for death or personal inj | | | | | | |
| | ■ No □ Yes | Other. Specify | | | | | | |
| 2.4 | United States Attorneys Office Priority Creditor's Name | Last 4 digits of account number | 3223 | \$0.00 | \$0.00 | \$0.00 | | |
| | Attn: Bankruptcy Assistant 700 Stewart St. Rm 5220 | When was the debt incurred? | | | | | | |
| | Seattle, WA 98101 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that | apply | | | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | | | | |
| | ☐ Debtor 1 only | ☐ Unliquidated | | | | | | |
| | Debtor 2 only | ☐ Disputed | | | | | | |
| | ■ Debtor 1 and Debtor 2 only | Type of PRIORITY unsecured cla | im: | | | | | |
| | ☐ At least one of the debtors and another | ☐ Domestic support obligations | | | | | | |
| | ■ Check if this claim is for a community debt | Taxes and certain other debts y | ou owe the gove | rnment | | | | |
| | Is the claim subject to offset? | ☐ Claims for death or personal inj | | | | | | |
| | ■ No | Other. Specify | | | | | | |
| | Yes | | | | | | | |
| Part | 2: List All of Your NONPRIORITY Unsect | ured Claims | | | | | | |
| 3. | Do any creditors have nonpriority unsecured claims against you? | | | | | | | |
| - | ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules. | | | | | | | |
| | Yes. | | | | | | | |
| 1 1 | l ist all of your nonnriority unsecured claims in the | alphabetical order of the creditor w | ho holds each c | laim If a creditor has mo | ore than one nonnriori | ty unsecured | | |

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 8

| | or 1 Olivier C Zara or 2 Kristine Mabuti Ogoy | | Case number (if know) | | | | |
|-----|---|---|---|----------|--|--|--|
| 4.1 | Action Collection Service | Last 4 digits of account number | 7639 | \$421.00 | | | |
| | Nonpriority Creditor's Name 1325 Vista Ave. Boise. ID 83705 | When was the debt incurred? | 2015 | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | | | |
| | Who incurred the debt? Check one. | _ | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | | Type of NONPRIORITY unsecure | d claim: | | | | |
| | ☐ At least one of the debtors and another | ☐ Student loans | | | | | |
| | ■ Check if this claim is for a community debt Is the claim subject to offset? | aration agreement or divorce that you did not | | | | | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | | | | |
| | Yes | ■ Other. Specify Collecting #5368 | for Planned Parenthoon #5389, | | | | |
| 4.2 | American Express | Last 4 digits of account number | 3499 | \$0.00 | | | |
| | Nonpriority Creditor's Name PO Box 981537 EI Paso, TX 79998-1537 | When was the debt incurred? | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | | |
| | Debtor 1 only | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | <u> </u> | Disputed | | | | | |
| | ■ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecure | d claim: | | | | |
| | At least one of the debtors and another | ☐ Student loans | | | | | |
| | ■ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | | | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | | | | |
| | Yes | Other. Specify Charge Of | f | | | | |
| 4.3 | Bank of America Nonpriority Creditor's Name | Last 4 digits of account number | | \$0.00 | | | |
| | Attn: Bankruptcy Dept Po Box 26012 | When was the debt incurred? | 87065 | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | | | |
| | ☐ Debtor 1 only | | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | | | | | |
| | ☐ At least one of the debtors and another | Student loans | | | | | |
| | ■ Check if this claim is for a community debt | _ | | | | | |
| | Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | | | | | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| | Yes | | d Nov. 2014 | | | | |
| | □ 1eS | Other. Specify Foreclose | u 1107. 2014 | | | | |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 3 of 8

| | 1 Olivier C Zara 2 Kristine Mabuti Ogoy | Case number (if know) | |
|-----|---|---|--------|
| 4.4 | Bank of America | Last 4 digits of account number 7065 | \$0.00 |
| | Nonpriority Creditor's Name PO Box 94100 | When was the debt incurred? | |
| | Simi Valley, CA 93094-1000 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | |
| | Debtor 1 only | ☐ Unliquidated | |
| | ☐ Debtor 2 only | ☐ Disputed | |
| | ■ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | ☐ At least one of the debtors and another | ☐ Student loans | |
| | ■ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | | |
| | Yes | Other. Specify Foreclosed Nov. 2014 | |
| 4.5 | BECU | Last 4 digits of account number 0017 | \$0.00 |
| | Nonpriority Creditor's Name PO Box 97050 Seattle, WA 98124-9750 | When was the debt incurred? | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | | ☐ Disputed | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | ☐ At least one of the debtors and another | ☐ Student loans | |
| | ■ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify | |
| 4.6 | Citicards CBNA Nonpriority Creditor's Name | Last 4 digits of account number 6212 | \$0.00 |
| | PO Box 6497 Sioux Falls, SD 57117 | When was the debt incurred? | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | Пол | |
| | ☐ Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ■ Check if this claim is for a community debt | ☐ Student loans | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | □Yes | Other. Specify | |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 4 of 8

| | Olivier C Zara Kristine Mabuti Ogoy | Case number (if know) | | | | |
|----|--|---|-------------|--|--|--|
| | Condominium Law Group | Last 4 digits of account number 8338 | \$0.00 | | | |
| | Nonpriority Creditor's Name 10310 Aurora Ave. N Seattle, WA 98133 | When was the debt incurred? | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | | | |
| V | Who incurred the debt? Check one. | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| I | Debtor 1 and Debtor 2 only | Disputed | | | | |
| _ | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | |
| _ | Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not | | | | |
| ls | s the claim subject to offset? | report as priority claims | | | | |
| | No | \square Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | | for Red Mill 1 Condo HOA | | | | |
| [| Yes | ■ Other. Specify King Co Sup Crt LAWSUIT #12-2-02833-8 KNT | | | | |
| | Harborview Medical Center Nonpriority Creditor's Name | Last 4 digits of account number 3223 | \$49.22 | | | |
| F | PO Box 34570 Seattle, WA 98124-1570 | When was the debt incurred? | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | | | |
| V | Who incurred the debt? Check one. | | | | | |
| | Debtor 1 only | Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| _ | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | |
| _ | _ | ☐ Student loans | | | | |
| | ■ Check if this claim is for a community debt sthe claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| _ | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | ⊒ Yes | ■ Other. Specify | | | | |
| | | Other. Specify | | | | |
| | Jefferson Capital Systems LLC Nonpriority Creditor's Name | Last 4 digits of account number 3274 | \$53.00 | | | |
| 1 | 16 McLeland Road Saint Cloud, MN 56303 | When was the debt incurred? | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | | | |
| V | Who incurred the debt? Check one. | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: ☐ Student loans | | | | |
| | Check if this claim is for a community debt | | | | | |
| | ■ Check if this claim is for a community debt Is the claim subject to offset? □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | ☐Yes | ■ Other. Specify Collecting for Verizon | | | | |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 5 of 8

| 2 Kristine Mabuti Ogoy | Case number (if know) | |
|---|---|-------------|
| Progressive Financial Services | Last 4 digits of account number 7109 | \$29.31 |
| Nonpriority Creditor's Name PO Box 22083 | When was the debt incurred? 2015 | |
| Tempe, AZ 85285 | | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| ☐ Debtor 1 only | ☐ Contingent | |
| ☐ Debtor 2 only | Unliquidated | |
| ■ Debtor 1 and Debtor 2 only | Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| _ | ☐ Student loans | |
| ■ Check if this claim is for a community debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify Collecting for U of W Lab | |
| Red Mill 1 Condo HOA | Last 4 digits of account number 8338 | \$21,661.56 |
| Nonpriority Creditor's Name | | • |
| c/o Condominium Law Group | When was the debt incurred? | |
| 10310 Aurora Ave. N | | |
| Seattle, WA 98133 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | As of the date you me, the claim is. Check all that apply | |
| Debtor 1 only | ☐ Contingent | |
| _ | ☐ Unliquidated | |
| Debtor 2 only | ☐ Disputed | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| At least one of the debtors and another | ☐ Student loans | |
| Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | _ King Co Sup Crt LAWSUIT | |
| Yes | Other. Specify #12-2-02833-8 KNT | |
| Renton Collections | Last 4 digits of account number | \$577.00 |
| Nonpriority Creditor's Name Po Box 272 | When was the debt incurred? | |
| Renton, WA 98057 | As of the date was file the plains in Observable III that such | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| _ | ☐ Contingent | |
| Debtor 1 only | ☐ Unliquidated | |
| Debtor 2 only | ☐ Disputed | |
| ■ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| ☐ At least one of the debtors and another | Student loans | |
| ■ Check if this claim is for a community debt | | |
| Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | | |
| Yes | ■ Other. Specify Collecting for Associated Emergency Phys | |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 6 of 8

| Debto Debto | r 1 Olivier C Zara r 2 Kristine Mabuti Ogoy | Case number (if know) | |
|----------------|--|--|----------------------|
| 4.13 | State Collection Service Nonpriority Creditor's Name | Last 4 digits of account number 3602 | \$2,770.00 |
| | POB 6250 | When was the debt incurred? | |
| | Madison, WI 53716 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | |
| | Debtor 1 only | ☐ Unliquidated | |
| | Debtor 2 only | □ Disputed | |
| | ■ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | ☐ At least one of the debtors and another | ☐ Student loans | |
| | ■ Check if this claim is for a community debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | lacksquare Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Collecting for Valley Medical Center | |
| 4.14 | UW Lab Medicine Nonpriority Creditor's Name | Last 4 digits of account number 2365 | \$0.00 |
| | PO Box 9468 Seattle, WA 98109-0468 | When was the debt incurred? | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ☐ Debtor 1 only | Contingent | |
| | ☐ Debtor 2 only | Unliquidated | |
| | ■ Debtor 1 and Debtor 2 only | Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: ☐ Student loans | |
| | Check if this claim is for a community debt | \square Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify | |
| 4.15 | UW Physicians | Last 4 digits of account number 2365 | \$140.32 |
| | Nonpriority Creditor's Name PO Box 35162 | When was the debt incurred? | · · |
| | Seattle, WA 98124 | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ■ Check if this claim is for a community debt | ☐ Student loans | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify | |
| Part 3 | List Others to Be Notified About a Debt | That You Already Listed | |
| trying more | his page only if you have others to be notified abou g to collect from you for a debt you owe to someon | t your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a c e else, list the original creditor in Parts 1 or 2, then list the collection agency here. Sim ed in Parts 1 or 2, list the additional creditors here. If you do not have additional perso | nilarly, if you have |
| - | and Address On | n which entry in Part 1 or Part 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims | |
| | La | Part 2: Creditors with Nonpriority Unsecured Claims st 4 digits of account number | |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 7 of 8

| De | btor | 1 | Olivier C | Zara |
|----|------|---|-----------|------|
| _ | | | | |

Debtor 2 Kristine Mabuti Ogoy Case number (if know)

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total claim | 1 |
|--------------|-----|---|-----|-------------|-----------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | 01 | O. Later | 01 | Total Claim | |
| Total claims | 6f. | Student loans | 6f. | \$ | 0.00 |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 25,701.41 |
| | 6j. | Total. Add lines 6f through 6i. | 6j. | \$ | 25,701.41 |

| Fill in this infor | rmation to identify your | case: | | |
|------------------------|--------------------------|------------------|---------------|--------------------------------------|
| Debtor 1 | Olivier C Zara | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Kristine Mabuti O | goy | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | WESTERN DISTRICT | OF WASHINGTON | |
| Case number (if known) | | | | ☐ Check if this is an amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for |
|--|---|
| 2.1 Lexington Heights 300 Vuemont PI SE Renton, WA 98056 | Currently in a 1 year lease agreement |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

| Debtor 1 | | | | | |
|-----------------------------------|--|--|--|--|---|
| 20210 | Olivier C Zara First Name | Middle Name | Last Name | | |
| Debtor 2 | . not riamo | | Edot Namo | | |
| (Spouse if, | | Middle Name | Last Name | | |
| United S | tates Bankruptcy Court for the: | WESTERN DISTRICT | OF WASHINGTON | | |
| Case nui | mber | | | _ | if this is an ed filing |
| | al Form 106H | lab (a na | | | |
| Sche | dule H: Your Cod | debtors | | | 12/15 |
| your nam | and number the entries in the and case number (if known o you have any codebtors? (if | n). Answer every questio | n. | o this page. On the top of any Additional as a codebtor. | al Pages, write |
| ■ N | ~ | | | | |
| | lithin the last 8 years, have yo | | proporty state or territor | 2 (Community and a major of the condition of the conditio | |
| | ona, Camornia, Idano, Ecuisiani | a, Nevada, New Mexico, F | Puerto Rico, Texas, Washi | | ries include |
| ■ N | o. Go to line 3. es. Did your spouse, former spo | | uerto Rico, Texas, Washi | | <i>rie</i> s include |
| ■ N □ Yo 3. In Co in lin | o. Go to line 3. es. Did your spouse, former spouse | ouse, or legal equivalent li otors. Do not include you if that person is a guara | ve with you at the time? ur spouse as a codebtor antor or cosigner. Make | | ne person shown hedule D (Officia |
| ■ N □ Yo 3. In Co in lin | o. Go to line 3. es. Did your spouse, former spouse | ouse, or legal equivalent li otors. Do not include you if that person is a guara al Form 106E/F), or Sche | ve with you at the time? ur spouse as a codebtor antor or cosigner. Make | ngton, and Wisconsin.) if your spouse is filing with you. List the sure you have listed the creditor on Sc | ne person shown hedule D (Officia Schedule G to |
| ■ N □ Yo 3. In Co in lin | o. Go to line 3. es. Did your spouse, former spoolumn 1, list all of your codeline 2 again as a codebtor only m 106D), Schedule E/F (Official out Column 2: | ouse, or legal equivalent li otors. Do not include you if that person is a guara al Form 106E/F), or Sche | ve with you at the time? ur spouse as a codebtor antor or cosigner. Make | if your spouse is filing with you. List the sure you have listed the creditor on Sc 6G). Use Schedule D, Schedule E/F, or Column 2: The creditor to whom yo | ne person shown hedule D (Officia Schedule G to |
| 3. In Coin lin Form | o. Go to line 3. es. Did your spouse, former spoolumn 1, list all of your codeline 2 again as a codebtor only m 106D), Schedule E/F (Official out Column 2: | ouse, or legal equivalent li otors. Do not include you if that person is a guara al Form 106E/F), or Sche | ve with you at the time? ur spouse as a codebtor antor or cosigner. Make | if your spouse is filing with you. List the sure you have listed the creditor on Sc 6G). Use Schedule D, Schedule E/F, or Column 2: The creditor to whom yo Check all schedules that apply: | ne person shown hedule D (Officia Schedule G to |
| 3. In Coin lin Form | o. Go to line 3. es. Did your spouse, former spoolumn 1, list all of your codeline 2 again as a codebtor only m 106D), Schedule E/F (Official cout Column 2. Column 1: Your codebtor Name, Number, Street, City, State and | ouse, or legal equivalent li otors. Do not include you if that person is a guara al Form 106E/F), or Sche | ve with you at the time? ur spouse as a codebtor antor or cosigner. Make | if your spouse is filing with you. List the sure you have listed the creditor on Sc 6G). Use Schedule D, Schedule E/F, or Column 2: The creditor to whom yo Check all schedules that apply: Schedule D, line Schedule E/F, line | ne person shown hedule D (Officia Schedule G to |
| 3. In Coin lin Form | o. Go to line 3. es. Did your spouse, former spouse | ouse, or legal equivalent li otors. Do not include you if that person is a guara al Form 106E/F), or Sche | verto Rico, Texas, Washive with you at the time? ur spouse as a codebtor antor or cosigner. Make edule G (Official Form 10) | if your spouse is filing with you. List the sure you have listed the creditor on Sc 6G). Use Schedule D, Schedule E/F, or Column 2: The creditor to whom yo Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line | ne person shown hedule D (Officia Schedule G to |
| 3. In Coin lin Form fill o | o. Go to line 3. es. Did your spouse, former spoolumn 1, list all of your codeline 2 again as a codebtor only m 106D), Schedule E/F (Official cout Column 2. Column 1: Your codebtor Name, Number, Street, City, State and Name | ouse, or legal equivalent li otors. Do not include you if that person is a guara al Form 106E/F), or Sche | verto Rico, Texas, Washive with you at the time? ur spouse as a codebtor antor or cosigner. Make edule G (Official Form 10) | if your spouse is filing with you. List the sure you have listed the creditor on Sc 6G). Use Schedule D, Schedule E/F, or Column 2: The creditor to whom yo Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line | ne person shown hedule D (Officia Schedule G to |

| Fill | in this information to identify you | r case: | | | | | | | |
|-------------|--|--|-------------------------------|------------|-------|---|-----------------------|----------------------------------|-----------|
| Del | otor 1 Olivier C 2 | Zara | | | _ | | | | |
| | otor 2 Kristine M | labuti Ogoy | | | | | | | |
| Uni | ted States Bankruptcy Court for | he: WESTERN DISTRIC | T OF WASHINGTON | <u> </u> | | | | | |
| (If kr | se number | | - | | | Check if this is: An amende A supplementation income in | d filing ent showi | ing postpetition following date: | |
| | fficial Form 106l | | | | | MM / DD/ Y | YYY | | |
| S | chedule I: Your In | come | | | | | | | 12/15 |
| spo atta | plying correct information. If youse. If you are separated and you a separate to this form t1: Describe Employment information. | our spouse is not filing w n. On the top of any addit | ith you, do not inclu | ude info | rmati | on about your spo d case number (if | ouse. If r known). | more space is | needed, |
| | If you have more than one job, attach a separate page with information about additional employers. | | ■ Employed | | | | ■ Employed | | |
| | | Employment status | ☐ Not employed | | | □ Not e | • | | |
| | | Occupation | Cashier | | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Costco | | | | | | |
| | Occupation may include studer or homemaker, if it applies. | nt Employer's address | 999 Lake Dr Issaquah, WA 9 | 8027 | | | | | |
| | | How long employed t | here? 14 yrs. | 6 mos. | | | | | |
| Par | t 2: Give Details About M | Ionthly Income | | | | | | | |
| | mate monthly income as of the use unless you are separated. | date you file this form. If | you have nothing to | report fo | r any | line, write \$0 in the | space. I | Include your no | on-filing |
| | u or your non-filing spouse have e space, attach a separate sheet | | ombine the information | on for all | emp | oyers for that perso | on on the | e lines below. If | you need |
| | | | | | | For Debtor 1 | | ebtor 2 or ling spouse | |
| 2. | List monthly gross wages, sa deductions). If not paid monthly | | | 2. | \$ | 3,782.24 | \$ | 0.00 | |
| 3. | Estimate and list monthly over | ertime pay. | | 3. | +\$ | 0.00 | +\$ | 0.00 | |
| 4. | Calculate gross Income. Add | I line 2 + line 3. | | 4. | \$ | 3,782.24 | \$ | 0.00 | |

Debtor 1
Debtor 2
Debtor 2
Debtor 2
Debtor 2
Debtor 3
Debtor 4
Debtor 4
Debtor 5
Debtor 6
Debtor 1
Debtor 2
Debtor 1
Debtor 2
Debtor 2
Debtor 2
Debtor 3
Debtor 4
Debtor 4
Debtor 4
Debtor 5
Debtor 5
Debtor 6
Debtor 7
Debtor 7
Debtor 7
Debtor 8
Debtor 9
Deb

Case number (if known)

| | | | | For | Debtor 1 | | r Debtor 2 or n-filing spouse | |
|-----|--|---|------------|-----|---------------|-------------|----------------------------------|---------|
| | Сору | line 4 here | 4. | \$ | 3,782.24 | \$ | 0.00 | |
| 5. | List a | all payroll deductions: | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$ | 981.98 | \$ | 0.00 | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$ | 0.00 | \$ | 0.00 | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | 0.00 | \$ | 0.00 | |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$ | 0.00 | \$ | 0.00 | |
| | 5e. | Insurance | 5e. | \$ | 183.63 | \$ | 0.00 | |
| | 5f. | Domestic support obligations | 5f. | \$ | 0.00 | \$ | 0.00 | |
| | 5g. | Union dues | 5g. | \$ | 0.00 | \$ | 0.00 | |
| | 5h. | Other deductions. Specify: Employee Fund | 5h.+ | \$ | 4.33 | - \$_ | 0.00 | |
| 6. | Add t | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 1,169.94 | \$_ | 0.00 | |
| 7. | Calcı | ulate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 2,612.30 | \$_ | 0.00 | |
| 8. | List a 8a. | All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ | 0.00 | \$_ | 0.00 | |
| | 8b. | Interest and dividends | 8b. | \$ | 0.00 | \$_ | 0.00 | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$ | 0.00 | \$ | 0.00 | |
| | 8d. | Unemployment compensation | 8d. | \$_ | 0.00 | \$- | 0.00 | |
| | 8e. | Social Security | 8e. | \$_ | 0.00 | <u>\$</u> - | 0.00 | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | e _ 8f. | \$ | 0.00 | \$_ | 0.00 | |
| | 8g. | Pension or retirement income | 8g. | \$ | 0.00 | \$_ | 0.00 | |
| | 8h. | Other monthly income. Specify: | 8h.+ | \$ | 0.00 | + \$_ | 0.00 | |
| 9. | Add a | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 0.00 | \$_ | 0.00 | |
| 10. | Calcı | ulate monthly income. Add line 7 + line 9. | 10. \$ | - 2 | 2,612.30 + \$ | | 0.00 = \$ 2 | ,612.30 |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | ' - | | - | | | ,012.00 |
| 11. | 1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 | | | | | | | |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The reset hat amount on the Summary of Schedules and Statistical Summary of Certales | | | | | | ,612.30 |
| | | | | | | | monthly i | |
| 13. | Do yo | ou expect an increase or decrease within the year after you file this form | ? | | | | • | |
| | | No. | | | | | | |
| | | Yes. Explain: | | | | | | |

| | in this informa | ation to identify yo | our case: | | | | | | | |
|------------|--|--|--|---|---|------------|-------------|----------------|--|-------|
| Deb | otor 1 | Olivier C Zar | ·a | | | Ch | eck if this | s is: | | |
| | | | | | | | | ended filing | | |
| | otor 2 | Kristine Mab | outi Ogoy | 1 | | | | | wing postpetition cha the following date: | pter |
| (Spo | ouse, if filing) | | | | | | 13 exp | enses as or | the following date. | |
| Unit | ed States Bankr | ruptcy Court for the: | WESTE | ERN DISTRICT OF WASH | INGTON | | MM / E | DD / YYYY | | |
| ! | e number nown) | | | | | | | | | |
| O | fficial Fo | orm 106J | | | | | | | | |
| S | chedule | J: Your | Exper | ises | | | | | | 12/15 |
| Be info | as complete ormation. If member (if know | and accurate as nore space is ne n). Answer ever | s possible eded, atta ry questio | . If two married people a ich another sheet to this | | | | | | |
| | | ribe Your House | hold | | | | | | | |
| 1. | Is this a join | | | | | | | | | |
| | □ No. Go to | | • | -1- hh-1-10 | | | | | | |
| | _ | | ın a separ | ate household? | | | | | | |
| | ■ N □ Y | - | st file Offic | ial Form 106J-2, <i>Expense</i> | s for Separate House | ehold of D | ebtor 2. | | | |
| 2. | Do you hav | e dependents? | ■ No | | | | | | | |
| | Do not list D and Debtor 2 | | ☐ Yes. | Fill out this information for each dependent | Dependent's relation Debtor 1 or Debtor | | De age | pendent's e | Does dependent live with you? | |
| | Do not state | the | | | | | | | □ No | |
| | dependents | names. | | | | | | | ☐ Yes | |
| | | | | | | | | | □ No | |
| | | | | | | | | | ☐ Yes ☐ No | |
| | | | | | | | | | ☐ No ☐ Yes | |
| | | | | | | | | | □ No | |
| | | | | | | | | | ☐ Yes | |
| 3. | expenses o | penses include of people other t d your depende | han $_{oldsymbol{\square}}$ | No Yes | | | | | | |
| | | ate Your Ongoi | | | | | | | | |
| exp | | | | uptcy filing date unless y y is filed. If this is a supp | | | | | | |
| | | | | government assistance cluded it on Schedule I: | | | | | | |
| (Of | ficial Form 10 | 061.) | | | | | | Your expe | enses | |
| 4. | | or home owners and any rent for th | | ses for your residence. I or lot. | nclude first mortgage | e 4. | \$ | | 1,275.00 | |
| | If not include | ded in line 4: | | | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. | \$ | | 0.00 | |
| | 4b. Prope | erty, homeowner's | s, or renter | 's insurance | | 4b. | \$ | | 13.00 | |
| | | | | upkeep expenses | | 4c. | : | | 0.00 | |
| 5. | | owner's associat | | dominium dues our residence, such as ho | me equity loans | 4d. 5. | \$ \$ | | 0.00 0.00 | |
| ٥. | , wanti Jilal I | sage paying | J. y. | 1001a01100, 0a011 a3 110 | oquity touris | ٥. | Ψ | | 0.00 | |

| | vier C Zara stine Mabuti Ogoy | Case num | ber (if known) | |
|--------------------------|--|--------------------------------|------------------------------|-----------------------------|
| Utilities: | | | | |
| | etricity, heat, natural gas | 6a. | \$ | 175.00 |
| | er, sewer, garbage collection | 6b. | | 40.00 |
| | ephone, cell phone, Internet, satellite, and cable services | 6c. | · | 190.00 |
| | er. Specify: | 6d. | | 0.00 |
| | housekeeping supplies | 7. | · | 450.00 |
| | and children's education costs | 8. | \$ | 70.00 |
| | laundry, and dry cleaning | 9. | \$ | 45.30 |
| O, | care products and services | 10. | · - | 34.00 |
| | nd dental expenses | 11. | | |
| | • | 11. | Φ | 20.00 |
| | ation. Include gas, maintenance, bus or train fare. lude car payments. | 12. | \$ | 100.00 |
| | ment, clubs, recreation, newspapers, magazines, and books | 13. | · | 40.00 |
| | e contributions and religious donations | 14. | | 10.00 |
| | <u> </u> | 14. | Ψ | 10.00 |
| Insurance Do not inc | Lude insurance deducted from your pay or included in lines 4 or 20. | | | |
| 15a. Life | | 15a. | \$ | 0.00 |
| | Ith insurance | 15a. | · | 0.00 |
| | icle insurance | 15b. | · | 25.00 |
| | er insurance. Specify: | 15d. | · | 0.00 |
| | not include taxes deducted from your pay or included in lines 4 or 20. | 130. | Ψ | 0.00 |
| Specify: | not include taxes deducted from your pay of included in lines 4 of 20. | 16. | \$ | 0.00 |
| | nt or lease payments: | | <u> </u> | 0.00 |
| | payments for Vehicle 1 | 17a. | \$ | 0.00 |
| | payments for Vehicle 2 | 17b. | · | 0.00 |
| | Specify: | 17c. | * | 0.00 |
| | er. Specify: | 17d. | · | 0.00 |
| | nents of alimony, maintenance, and support that you did not report a | | Ψ | 0.00 |
| | from your pay on line 5, Schedule I, Your Income (Official Form 106) | | \$ | 0.00 |
| | ments you make to support others who do not live with you. |) - | \$ | 0.00 |
| Specify: | mone you make to cappert cancio and ac not are man you. | 19. | <u> </u> | 0.00 |
| | property expenses not included in lines 4 or 5 of this form or on Sc | | our Income | |
| | tgages on other property | 20a. | | 0.00 |
| | l estate taxes | 20b. | | 0.00 |
| | perty, homeowner's, or renter's insurance | 20c. | | 0.00 |
| | ntenance, repair, and upkeep expenses | 20d. | · - | 0.00 |
| | neowner's association or condominium dues | 20u. 20e. | | |
| | | | | 0.00 |
| Other: Sp | ecity: | 21. | +\$ | 0.00 |
| Calculate | your monthly expenses | | | |
| | ines 4 through 21. | | \$ | 2,487.30 |
| | line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | 2 | \$ | _, |
| | ine 22a and 22b. The result is your monthly expenses. | | \$ | 2 407 20 |
| 220. Aud I | ine 22a and 22b. The result is your monthly expenses. | | Ψ | 2,487.30 |
| Calculate | your monthly net income. | | | |
| | y line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 2,612.30 |
| | y your monthly expenses from line 22c above. | 23b. | -\$ | 2,487.30 |
| • | • | | | , - 100 |
| 23c. Sub | tract your monthly expenses from your monthly income. | | | 405.00 |
| | result is your monthly net income. | 23c. | \$ | 125.00 |
| For example modification | spect an increase or decrease in your expenses within the year after the do you expect to finish paying for your car loan within the year or do you expect your to the terms of your mortgage? | you file this r mortgage pa | s form? syment to increas | se or decrease because of a |
| No. | | | | |
| ☐ Yes. | Explain here: | | | |

| Fill in this inforn | nation to identify your | case: | | |
|---------------------------------------|---|--|--------------------------------------|--|
| Debtor 1 | Olivier C Zara | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Kristine Mabuti C |)goy | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bar | nkruptcy Court for the: | WESTERN DISTRICT | OF WASHINGTON | |
| Case number _ | | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |
| You must file this obtaining money | s form whenever you f | ile bankruptcy schedule n connection with a bar | | nation. false statement, concealing property, or to \$250,000, or imprisonment for up to 20 |
| Sign | n Below | | | |
| Did you pay | or agree to pay some | one who is NOT an atto | rney to help you fill out bankruptcy | forms? |
| ■ No | | | | |
| ☐ Yes. N | lame of person | | | ptcy Petition Preparer's Notice, Declaration, Official Form 119). |
| | ty of perjury, I declare true and correct. | that I have read the sur | nmary and schedules filed with this | declaration and |
| X /s/ Olivi | ier C Zara | | X /s/ Kristine Mabuti C | goy |
| Olivier | | | Kristine Mabuti Ogo | у |
| Signature | e of Debtor 1 | | Signature of Debtor 2 | |
| Date F | Sebruary 26 2016 | | Date February 26 3 | 2016 |

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

| Fill in this infor | mation to identify you | r case: | | | |
|------------------------|--|---|------------------------------------|-------------------------------------|------------------------------------|
| Debtor 1 | Olivier C Zara First Name | Middle News | LastName | | |
| Debtor 2 | Kristine Mabuti | Middle Name | Last Name | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | WESTERN DISTRICT OF | WASHINGTON | | |
| Case number | | | | | |
| (if known) | | | | _ | Check if this is an |
| | | | | | amended filing |
| Official Fo | rm 107 | | | | |
| | | Affairs for Individ | luals Filing for B | ankruntov | 12/15 |
| | | ible. If two married people a | | | |
| information. If n | nore space is needed | , attach a separate sheet to | | | |
| | n). Answer every que | | | | |
| Part 1: Give I | Details About Your Ma | arital Status and Where You | Lived Before | | |
| 1. What is you | ır current marital statı | us? | | | |
| ■ Married | i | | | | |
| ☐ Not ma | rried | | | | |
| 2. During the I | last 3 years, have you | lived anywhere other than | where you live now? | | |
| | | • | • | | |
| □ No ■ Yes Lie | st all of the places you | lived in the last 3 years. Do no | nt include where you live no | W | |
| | , , | · | | | |
| Debtor 1 P | rior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ac | ldress: | Dates Debtor 2 lived there |
| 17773 134 Renton, V | Ith Lane SE VA 98058 | From-To: Moved out No 2014 | ☐ Same as Debtor ′ | | ☐ Same as Debtor 1 From-To: |
| | | ver live with a spouse or legalifornia, Idaho, Louisiana, Ne | | | |
| | nes include Anzona, Ca | amornia, idano, Lodisiana, ive | vada, New Mexico, i dello iv | ico, rexas, washington and | Wisconsin.) |
| ■ No | alaa aasaa saasa Cill aast Oa | hada II Vara Oadabiana (O | Waist Farms 40011) | | |
| ☐ Yes. Mi | ake sure you fill out Sc | hedule H: Your Codebtors (O | miciai Form 106H). | | |
| Part 2 Expla | in the Sources of You | ır Income | | | |
| Fill in the tot | al amount of income yo | mployment or from operating the received from all jobs and a have income that you receive | all businesses, including par | t-time activities. | endar years? |
| □ No | | | | | |
| _ | II in the details. | | | | |
| | | Debtor 1 | | Debtor 2 | |
| | | Sources of income | Gross income | Sources of income | Gross income |
| | | Check all that apply. | (before deductions and exclusions) | Check all that apply. | (before deductions and exclusions) |
| | of current year until ed for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$3,009.77 | ☐ Wages, commissions, bonuses, tips | \$0.00 |
| | | ☐ Operating a business | | ☐ Operating a business | |
| Official Form 107 | | Statement of Financial Aff | airs for Individuals Filing for B | ankruptcy | page 1 |

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Best Case Bankruptcy

| | | | Debtor 1 | | Debtor 2 | |
|----------|---|--|--|---|--|--|
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | or last calendar year: anuary 1 to Decembe | r 31, 2015) | ■ Wages, commissions, bonuses, tips | \$46,454.96 | ☐ Wages, commissions bonuses, tips | \$0.00 |
| | | | ☐ Operating a business | | ☐ Operating a business | |
| | or the calendar year k anuary 1 to Decembe | | ■ Wages, commissions, bonuses, tips | \$44,461.00 | ☐ Wages, commissions bonuses, tips | \$0.00 |
| | | | ☐ Operating a business | | ☐ Operating a business | |
| | ■ No □ Yes. Fill in the | details. | Debtor 1 | | Debtor 2 | |
| | _ | the gross inc | ome from each source separa | tely. Do not include income t | that you listed in line 4. | |
| | ☐ Tes. Fill III tile | uetalis. | 511 | | D.11 | |
| | | | Sources of income | Gross income | Sources of income | Gross income |
| | | | Describe below | (before deductions and | December 1 and 1 and 1 | |
| | | | Boothbo Bolow | exclusions) | Describe below. | (before deductions and exclusions) |
| Pa | art 3: List Certain I | Payments You | Made Before You Filed for | exclusions) | Describe below. | , |
| Ра 6. | Are either Debtor 1 No. Neither individua | 's or Debtor 2 Debtor 1 nor I I primarily for a ne 90 days befor Go to line 7 List below paid that ci | Made Before You Filed for the Made Before You Filed for the Made Before You Filed for the Made Before 2 has primarily consumed a personal, family, or household for you filed for bankruptcy, die and creditor to whom you paireditor. Do not include payment | exclusions) Bankruptcy r debts? Imer debts. Consumer debt d purpose." d you pay any creditor a total d a total of \$6,225* or more ats for domestic support oblig | s are defined in 11 U.S.C. § Il of \$6,225* or more? in one or more payments a | and exclusions) § 101(8) as "incurred by an and the total amount you |
| Pa 6. | Are either Debtor 1 No. Neither individua During th No. Yes | 's or Debtor 2 Debtor 1 nor I I primarily for a ne 90 days befor Go to line 7 List below paid that co | Made Before You Filed for the Made Before You Filed for the Made Before You Filed for Debtor 2 has primarily consumed a personal, family, or household pre you filed for bankruptcy, diesech creditor to whom you pai | exclusions) Bankruptcy r debts? Imer debts. Consumer debt d purpose." d you pay any creditor a total d a total of \$6,225* or more ats for domestic support oblig his bankruptcy case. | s are defined in 11 U.S.C. § Il of \$6,225* or more? in one or more payments a gations, such as child suppo | and exclusions) § 101(8) as "incurred by an ond the total amount you ort and alimony. Also, do |
| Pa | Are either Debtor 1 No. Neither individua During th No. Yes * Subject | 's or Debtor 2 Debtor 1 nor I I primarily for a se 90 days before Go to line 7 List below a paid that co not include to adjustment | Made Before You Filed for the Made Before You Filed for the Made Before You Filed for the Made Before 2 has primarily consumed a personal, family, or household for you filed for bankruptcy, die 7. The each creditor to whom you painted the younge of the Made Before You Filed for You Filed for You Filed for the Made Before You Filed for You | exclusions) Bankruptcy r debts? Imer debts. Consumer debt Id purpose." d you pay any creditor a total d a total of \$6,225* or more tts for domestic support oblig his bankruptcy case. s after that for cases filed on Imer debts. | s are defined in 11 U.S.C. § Il of \$6,225* or more? in one or more payments a gations, such as child support or after the date of adjustn | and exclusions) § 101(8) as "incurred by an ond the total amount you ort and alimony. Also, do |
| Pa | Are either Debtor 1 No. Neither individual During the No. Yes * Subject Yes. Debtor 1 During the No. | 's or Debtor 2 Debtor 1 nor I I primarily for a ne 90 days before Go to line 7 List below a paid that continct include to adjustment or Debtor 2 of the 90 days before Go to line 7 | Made Before You Filed for the Made Before You Filed for the Made Before You Filed for the Made Before 2 has primarily consumed a personal, family, or household for you filed for bankruptcy, digraphic for the Made Before You filed for bankruptcy and the Made Before You filed for bankruptcy and the Made Before You filed for bankruptcy, digraphic for the Made Before You filed for bankruptcy, digraphic for the Made Before You filed for bankruptcy, digraphic for the Made Before You filed for bankruptcy, digraphic for the Made Before You filed for bankruptcy, digraphic for the Made Before You filed for bankruptcy, digraphic for the Made Before You filed for bankruptcy, digraphic for the Made Before You filed for bankruptcy, digraphic for the Made Before You filed for bankruptcy, digraphic for the Made Before You filed for bankruptcy, digraphic for the Made Before You filed for bankruptcy, digraphic for the Made Before You filed for bankruptcy, digraphic for the Made Before You filed for bankruptcy, digraphic for the Made Before You filed for bankruptcy, digraphic for the You filed for bankruptcy, digraphic for the You filed for bankruptcy, digraphic for the You filed for bankruptcy for the You filed for bankruptcy | exclusions) Bankruptcy r debts? Imer debts. Consumer debt Id purpose." d you pay any creditor a total d a total of \$6,225* or more tts for domestic support oblig his bankruptcy case. s after that for cases filed on Imer debts. | s are defined in 11 U.S.C. § Il of \$6,225* or more? in one or more payments a gations, such as child support or after the date of adjustn | and exclusions) § 101(8) as "incurred by an and the total amount you ort and alimony. Also, do |
| Pa 6. | Are either Debtor 1 No. Neither individual During the No. Yes * Subject Yes. Debtor 1 During the No. | 's or Debtor 2 Debtor 1 nor I I primarily for a se 90 days before Go to line 7 List below a paid that or not include at to adjustmen or Debtor 2 of the 90 days before Go to line 7 List below a include pay | Made Before You Filed for the Made Before You Filed for the Made Before You Filed for the Made Before 2 has primarily consumed a personal, family, or household for you filed for bankruptcy, digraphic for the Made Before You filed for bankruptcy and the Made Before You filed for bankruptcy and the Made Before You filed for bankruptcy, digraphic for the Made Before You filed for bankruptcy, digraphic for the Made Before You filed for bankruptcy, digraphic for the Made Before You filed for bankruptcy, digraphic for the Made Before You filed for bankruptcy, digraphic for the Made Before You filed for bankruptcy, digraphic for the Made Before You filed for bankruptcy, digraphic for the Made Before You filed for bankruptcy, digraphic for the Made Before You filed for bankruptcy, digraphic for the Made Before You filed for bankruptcy, digraphic for the Made Before You filed for bankruptcy, digraphic for the Made Before You filed for bankruptcy, digraphic for the Made Before You filed for bankruptcy, digraphic for the Made Before You filed for bankruptcy, digraphic for the You filed for bankruptcy, digraphic for the You filed for bankruptcy, digraphic for the You filed for bankruptcy for the You filed for bankruptcy | exclusions) Bankruptcy r debts? Imer debts. Consumer debt d purpose." d you pay any creditor a total d a total of \$6,225* or more ats for domestic support obligations bankruptcy case. s after that for cases filed on amer debts. d you pay any creditor a total d a total of \$600 or more and | s are defined in 11 U.S.C. § If of \$6,225* or more? In one or more payments a gations, such as child support or after the date of adjustral of \$600 or more? If of \$600 or more? | and exclusions) § 101(8) as "incurred by an on the total amount you ort and alimony. Also, do nent. |
| Pa | Are either Debtor 1 No. Neither individual During the No. Yes * Subject Yes. Debtor 1 During the No. | 's or Debtor 2 Debtor 1 nor I I primarily for a see 90 days before Go to line 7 List below a paid that continctude at to adjustment or Debtor 2 of the 90 days before Go to line 7 List below an attorney | Made Before You Filed for the Made Before You Filed for the Park of the Park o | exclusions) Bankruptcy r debts? Imer debts. Consumer debt Id purpose." Id you pay any creditor a total Id a total of \$6,225* or more Its for domestic support oblig Inis bankruptcy case. Is after that for cases filed on Imer debts. Id you pay any creditor a total Id a total of \$600 or more and Inis bigations, such as child sup | s are defined in 11 U.S.C. § Il of \$6,225* or more? In one or more payments a gations, such as child support or after the date of adjustral of \$600 or more? If the total amount you paid port and alimony. Also, do a | and exclusions) § 101(8) as "incurred by an one of the total amount you ort and alimony. Also, do nent. |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 2

| insider? Include payments on debts guaranteed or cosigned by an insider. ■ No □ Yes. List all payments to an insider Insider's Name and Address ■ Dates of payment ■ Total amount paid ■ Amount you still owe Include creditor's Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or modifications, and contract disputes. □ No ■ Yes. Fill in the details. | partner; managing agent, ns, such as child s payment t that benefited ar s payment 's name g? |
|--|---|
| Yes. List all payments to an insider Insider's Name and Address Dates of payment Total amount paid Amount you still owe Reason for this still owe | s payment 's name |
| 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments to an insider Insider's Name and Address Dates of payment Total amount paid Amount you still owe Reason for this Include creditor's Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or modifications, and contract disputes. No Yes. Fill in the details. | s payment 's name |
| insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments to an insider Insider's Name and Address Dates of payment Total amount pou still owe Include creditor's Include creditor's Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or modifications, and contract disputes. No Yes. Fill in the details. | s payment 's name |
| □ Yes. List all payments to an insider Insider's Name and Address □ Dates of payment □ Total amount paid □ Amount you still owe □ Include creditor's □ Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or modifications, and contract disputes. □ No □ Yes. Fill in the details. | g? |
| Insider's Name and Address Dates of payment Total amount paid Amount you still owe Reason for this include creditor's Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or modifications, and contract disputes. No Yes. Fill in the details. | g? |
| 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or modifications, and contract disputes. □ No ■ Yes. Fill in the details. | |
| 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or modifications, and contract disputes. □ No ■ Yes. Fill in the details. | |
| Constitute of the constitute o | Juolouy |
| Case title Nature of the case Court or agency Status of the case case number | ase |
| Red Mill 1 Condo HOA V Olivier and Kristine Zara 12-2-028338-KNT Civil King County Superior Court 401 4th Ave. N. Kent, WA 98032 □ Pending □ On appeal Concluded | |
| Garnishment | t |
| 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, see Check all that apply and fill in the details below. □ No ■ Yes. Fill in the information below. | eized, or levied? |
| Creditor Name and Address Describe the Property Date | Value of the property |
| Explain what happened | \$969.99 |
| Property was repossessed. | |
| ☐ Property was foreclosed. ■ Property was garnished. | |
| ☐ Property was attached, seized or levied. | |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

| Debto Debto | | Olivier C Zara Kristine Mabuti Ogoy | | Case num | ber (if known) | | |
|--|---|--|--------------------|---|-----------------------------------|------------------------|--|
| | I 0 | n 90 days before you filed for bankr unts or refuse to make a payment be No Yes. Fill in the details. | | did any creditor, including a bank or financia you owed a debt? | ll institution, set off any | amounts from your | |
| | | litor Name and Address | De | scribe the action the creditor took | Date action was taken | Amount | |
| Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or aNo | | | | | an assignee for the ben | efit of creditors, a | |
| |] \ | Yes | | | | | |
| Part 5 | 5: | List Certain Gifts and Contribution | s | | | | |
| I3. W ■ | 1 | n 2 years before you filed for bankro No Yes. Fill in the details for each gift. | uptcy, | did you give any gifts with a total value of mo | ore than \$600 per persor | n? | |
| F | Gifts Der p | s with a total value of more than \$60 person on to Whom You Gave the Gift and | 0 | Describe the gifts | Dates you gave the gifts | Value | |
| - | | ess: | | | | | |
| _ | Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity No Yes. Fill in the details for each gift or contribution. | | | | | | |
| r | nore Char | or contributions to charities that to than \$600 rity's Name Tess (Number, Street, City, State and ZIP Code | | Describe what you contributed | Dates you contributed | Value | |
| Part 6 | 6: | List Certain Losses | | | | | |
| | isas I ≀ | n 1 year before you filed for bankru ter, or gambling? No Yes. Fill in the details. | ptcy or | since you filed for bankruptcy, did you lose | anything because of the | eft, fire, other | |
| | | cribe the property you lost and the loss occurred | Include | be any insurance coverage for the loss the amount that insurance has paid. List g insurance claims on line 33 of Schedule A/B: tty. | Date of your loss | Value of property lost | |
| Part 7 | /: | List Certain Payments or Transfers | ; | | | | |
| C | /ithi onsi | n 1 year before you filed for bankru ulted about seeking bankruptcy or p | ptcy, d prepari | id you or anyone else acting on your behalf p ng a bankruptcy petition? 's, or credit counseling agencies for services req | | erty to anyone you | |
| E | Pers Addr Ema | Yes. Fill in the details. on Who Was Paid ress il or website address on Who Made the Payment, if Not Y | 'ou | Description and value of any property transferred | Date payment or transfer was made | Amount of payment | |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

| 17. | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. | | | | | | |
|-----|---|---|----------------------------|------------------|---|---|--|
| | Yes. Fill in the details. | | | | | | |
| | Person Who Was Paid Address | Description and votransferred | alue of any prope | erty | Date payment or transfer was made | Amount of payment | |
| 18. | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No | | | | | | |
| | Yes. Fill in the details. | Decemention and o | alua af | Dagarika ar | | Data transfer was | |
| | Person Who Received Transfer Address | Description and vo | | | ny property or eceived or debts hange | Date transfer was made | |
| | Person's relationship to you | | | | | | |
| 19. | Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro ■ No □ Yes. Fill in the details. | | y property to a se | elf-settled trus | st or similar device | of which you are a | |
| | Name of trust | Description and v | alue of the prope | erty transferre | d | Date Transfer was made | |
| Par | List of Certain Financial Accounts, Ins | struments, Safe Deposit | Boxes, and Stor | age Units | | | |
| 20. | Within 1 year before you filed for bankruptc sold, moved, or transferred? Include checking, savings, money market, chouses, pension funds, cooperatives, associated No | or other financial accou | nts; certificates o | of deposit; sha | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of account instrument | clos | e account was ed, sold, ed, or sferred | Last balance before closing or transfer | |
| 21. | Do you now have, or did you have within 1 y cash, or other valuables? | year before you filed for | bankruptcy, any | safe deposit | box or other depos | itory for securities, | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, St State and ZIP Code) | | escribe the co | ontents | Do you still have it? | |
| 22. | Have you stored property in a storage unit o ■ No □ Yes. Fill in the details. | or place other than your | home within 1 ye | ear before you | ı filed for bankrupto | cy | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or h to it? Address (Number, St State and ZIP Code) | | escribe the co | ontents | Do you still have it? | |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

| 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No | Par | t 9: | Identify Property You Hold or Control for S | omeone Else | | | | |
|--|-----|---|--|---|--------|-------------------------------------|-----------------------|--|
| Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) Whene's ZiP Code) | 23. | | | | | | | |
| Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Part 103 Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material Side means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material, poliutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No No Site Reads and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Address (Number, Street, City, State and ZIP Code) No Address (Number, Street, City, State and ZIP Code) No Address (Number, Street, City, State and ZIP Code) No Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Address (Number, Street, City, State and ZIP Code) No Address (Number, Street, City, State and ZIP Code) No Address (Number, Street, City, State and ZIP Code) No Address (Number, Street, City, Stat | | = | | | | | | |
| Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Size means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or user to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No | | _ | vner's Name | (Number, Street, City, State and ZIP | De | scribe the property | Value | |
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| to own, operate, or utilize it, including disposal sites. #### ############################### | - | tox reg | ic substances, wastes, or material into the air ulations controlling the cleanup of these sub | r, land, soil, surface water, grou stances, wastes, or material. | ndwa | ter, or other medium, including st | atutes or | |
| Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No | | | | | ıl law | , whether you now own, operate, o | or utilize it or used | |
| 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) ZIP Code) Address (Number, Street, City, State and ZIP Code) Yes. Fill in the details. No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) ZIP Code) Address (Number, Street, City, State and ZIP Code) Yes. Fill in the details. No Yes. Fill in the details. Court or agency Name No Yes. Fill in the details. Case Title Case Number Case Number Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Yes. Fill in the details. Court or agency Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP C | | | | | us wa | ste, hazardous substance, toxic s | substance, | |
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| Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State an | 24. | Has | s any governmental unit notified you that you | may be liable or potentially liab | le un | der or in violation of an environme | ental law? | |
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| No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Case Title Case Number Case Number Case Number Case Number Case Operation Part 11: Give Details About Your Business or Connections to Any Business Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation | | | | Address (Number, Street, City, State a | nd | , , | Date of notice | |
| Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Date of notice | 25. | Hav | ve you notified any governmental unit of any r | release of hazardous material? | | | | |
| Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Case Number Case Number Court or agency Name Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation | | | *** | | | | | |
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| □ A member of a limited liability company (LLC) or limited liability partnership (LLP) □ A partner in a partnership □ An officer, director, or managing executive of a corporation | | _ ` _ ` _ ` _ ` _ ` _ ` _ ` _ ` _ ` _ ` | | | | | | |
| ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation | | | | | | | | |
| ☐ An officer, director, or managing executive of a corporation | | | _ | , | F (| • | | |
| | | | | ve of a corporation | | | | |
| | | | _ | · | n | | | |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

| | ebtor 1 Olivier C Zara | | |
|---------------------|---|---|---|
| De | ebtor 2 Kristine Mabuti Ogoy | | Case number (if known) |
| | No. None of the above applies. Go to P | | |
| | Yes. Check all that apply above and fill | | |
| | Business Name Address (Number, Street, City, State and ZIP Code) | Describe the nature of the business Name of accountant or bookkeeper | Employer Identification number Do not include Social Security number or ITIN. |
| | | | Dates business existed |
| 28. | Within 2 years before you filed for bankruptoinstitutions, creditors, or other parties. No Yes. Fill in the details below. | cy, did you give a financial statement t | o anyone about your business? Include all financial |
| | Name Address (Number, Street, City, State and ZIP Code) | Date Issued | |
| Pa | rt 12: Sign Below | | |
| are with 18 U | | false statement, concealing property, o | d I declare under penalty of perjury that the answers or obtaining money or property by fraud in connection years, or both. |
| | ivier C Zara | Kristine Mabuti Ogoy | |
| Sig | gnature of Debtor 1 | Signature of Debtor 2 | |
| Da | February 26, 2016 | Date February 26, 2016 | |
| | you attach additional pages to Your Stateme No Yes | nt of Financial Affairs for Individuals F | iling for Bankruptcy (Official Form 107)? |
| Did ■ N | you pay or agree to pay someone who is not | an attorney to help you fill out bankru | ptcy forms? |
| | · · · · | ptcy Petition Preparer's Notice, Declaration | on, and Signature (Official Form 119). |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Notice Required by 11 U.S.C. § 342(b) for **Individuals Filing for Bankruptcy** (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations:

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing tee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

United States Bankruptcy Court Western District of Washington

| | | 8 | | | |
|------|---|---|---|---|----|
| In | Olivier C Zara re Kristine Mabuti Ogoy | | Case No. | | |
| | Kristine Mabuti Ogoy | Debtor(s) | Chapter | 13 | |
| | DISCLOSURE OF COMPI | ENSATION OF ATTO | RNEY FOR DI | EBTOR(S) | |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the file be rendered on behalf of the debtor(s) in contemplation | ling of the petition in bankruptcy | , or agreed to be paid | to me, for services rendered or t | 0 |
| | For legal services, I have agreed to accept | | \$ | 3,500.00 | |
| | Prior to the filing of this statement I have received | d | \$ | 0.00 | |
| | Balance Due | | \$ | 3,500.00 | |
| 2. | \$ 310.00 of the filing fee has been paid. | | | | |
| 3. | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 5. | ■ I have not agreed to share the above-disclosed con | npensation with any other person | unless they are mem | bers and associates of my law fir | m. |
| | ☐ I have agreed to share the above-disclosed comper copy of the agreement, together with a list of the n | | | | |
| 6. | In return for the above-disclosed fee, I have agreed to | render legal service for all aspec | ts of the bankruptcy | ease, including: | |
| | a. Analysis of the debtor's financial situation, and ren b. Preparation and filing of any petition, schedules, st c. Representation of the debtor at the meeting of cred d. [Other provisions as needed] Pursuant to Local Rule 2016-1:The filing 3015-1; filing with the chapter 13 trust by Fed. R. Bankr. P. 1007; appearing a confirmation and motions for relief from and presenting unopposed or agreed valuation of collateral or providing for the initial plan as necessary to obtain negotiations with the Department of L | tatement of affairs and plan which liters and confirmation hearing, a region of a chapter 13 plan in the see the Chapter 13 Information the 11 U.S.C. § 341 meeting on stay that are resolvable worders assuming or rejecting pre-confirmation adequate an order confirming the pla | h may be required; nd any adjourned her the form required by on Sheet together g of creditors; res without argument ng leases; resolvin protection payme n; adding creditor | rings thereof; y Local Bankruptcy Rule with the documents require ponding to objections to before the court; negotiating g disputes regarding the ints to creditors; amending | g |
| 7. | By agreement with the debtor(s), the above-disclosed in Representation of the debtors in any of any other adversary proceeding. | | | es, relief from stay actions | or |
| | | CERTIFICATION | | | |
| this | I certify that the foregoing is a complete statement of a s bankruptcy proceeding. | any agreement or arrangement for | r payment to me for re | epresentation of the debtor(s) in | |
| _ | February 26, 2016 | /s/ Christopher A | | | |
| | Date | Christopher A. B Signature of Attorn | | | |
| | | Law Office of Ch | ristopher A. Bens | on, PLLC | |
| | | 1814 S. 324th Pl. Federal Way, WA | | | |
| | | (253) 815-6940 I | Fax: (253) 815-694 | 0 | |
| | | cbenson@cbens | | | |
| | | Name of law firm | | | |

United States Bankruptcy Court Western District of Washington

| In re | Olivier C Zara Kristine Mabuti Ogoy | | Case No. | |
|--------|--|---|-----------------------|---------------------|
| | | Debtor(s) | Chapter | 13 |
| | VERIF | ICATION OF CREDITOR | MATRIX | |
| Γhe ab | ove-named Debtors hereby verify that | the attached list of creditors is true and co | orrect to the best of | of their knowledge. |
| Date: | February 26, 2016 | /s/ Olivier C Zara | | |
| | | Signature of Debtor | | |
| Date: | February 26, 2016 | /s/ Kristine Mabuti Ogoy | | |
| | | Kristine Mabuti Ogoy | | |

Signature of Debtor

ACTION COLLECTION SERVICE 1325 VISTA AVE. BOISE, ID 83705

AMERICAN EXPRESS PO BOX 981537 EL PASO, TX 79998-1537

BANK OF AMERICA PO BOX 94100 SIMI VALLEY, CA 93094-1000

BANK OF AMERICA ATTN: BANKRUPTCY DEPT PO BOX 26012 GREENSBORO, NC 27410

BECU PO BOX 97050 SEATTLE, WA 98124-9750

CITICARDS CBNA PO BOX 6497 SIOUX FALLS, SD 57117

CONDOMINIUM LAW GROUP 10310 AURORA AVE. N SEATTLE, WA 98133

DEPARTMENT OF TREASURY INTERNAL REVENUE SERVICES FRESNO, CA 93888

HARBORVIEW MEDICAL CENTER PO BOX 34570 SEATTLE, WA 98124-1570

INTERNAL REVENUE SERVICE 915 SECOND AVE SPF OFFICE SEATTLE WA 98174, SE

INTERNAL REVENUE SERVICE PO BOX 7346 PHILADELPHIA, PA 19101-7346 JEFFERSON CAPITAL SYSTEMS LLC 16 MCLELAND ROAD SAINT CLOUD, MN 56303

LEXINGTON HEIGHTS 300 VUEMONT PL SE RENTON, WA 98056

PROGRESSIVE FINANCIAL SERVICES PO BOX 22083 TEMPE, AZ 85285

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